

## UHCL FY2025 BASE BUDGET REDUCTION PLAN

Unit/College: \_\_\_\_\_

For Business Administrator Entry Only							Business Administrator Must Document All Shifts						
Reductions ONLY							Complete this side for ALL SHIFTS to Local Funds						
Speed Type	Cost Center			Budget Node	Position Number	Decrease Amount ( )	Speed Type	Cost Center			Budget Node	Position Number	Increase Amount
	Fund	Dept	Prog.					Fund	Dept	Prog			
<b>STATE FUNDS:</b>													
1													
2													
3													
4													
5													
6													
7													
8													
						0.00							0.00
<b>2064 FUNDS:</b>													
9													
10													
11													
12													
13													
14													
15													
16													
						0.00							0.00
<b>OTHER CENTRALLY ALLOCATED FUNDS:</b>													
17													
18													
19													
20													
21													
22													
23													
24													
						0.00							0.00
<b>TOTAL ALL FUNDS</b>						<b>0.00</b>							<b>0.00</b>

<b>APPROVED BY:</b>	<b>DATE:</b>	
_____	_____	
Business Administrator		
_____	_____	
Unit/College Head		
_____	_____	
Vice President		

**Note:**

For each reduction and/or shift, please fill out the Budget Reduction Justification section found on page 2. Uncompleted forms will not be accepted.

**Budget Reduction Justification**

#	Short Description:	Impacted Program Outcome:	Justification for Reduction / Shift to Local Funds:	Intended Resolution:
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				