<table>
<thead>
<tr>
<th>TAB</th>
<th>DESCRIPTION</th>
<th>ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>UNIVERSITY OF UTAH SCHOOL OF MEDICINE&lt;br&gt;Agreement Renewal and Annual Report</td>
<td>Motion to approve</td>
</tr>
<tr>
<td>2</td>
<td>AMENDMENT TO BOARD POLICY&lt;br&gt;Section V.R. - Establishment of Fees - First Reading</td>
<td>Motion to approve</td>
</tr>
<tr>
<td>3</td>
<td>AMENDMENT TO BOARD POLICY&lt;br&gt;Section V.U. - Entertainment and Related Expenses - First Reading</td>
<td>Motion to approve</td>
</tr>
<tr>
<td>4</td>
<td>AMENDMENT TO BOARD POLICY&lt;br&gt;Section V.F. – Bonds and Other Indebtedness – Second Reading</td>
<td>Motion to approve</td>
</tr>
<tr>
<td>5</td>
<td>BOISE STATE UNIVERSITY&lt;br&gt;Sports/Recreation Green Field Project</td>
<td>Motion to approve</td>
</tr>
<tr>
<td>6</td>
<td>UNIVERSITY OF IDAHO&lt;br&gt;Aquaculture Research Facility Building Project</td>
<td>Motion to approve</td>
</tr>
<tr>
<td>7</td>
<td>FY 2015 OPPORTUNITY SCHOLARSHIP</td>
<td>Motion to approve</td>
</tr>
</tbody>
</table>
SUBJECT
University of Utah School of Medicine (UUSOM) agreement renewal and annual report

APPLICABLE STATUTES, RULE OR POLICY
Idaho Code §33-3720
Idaho State Board of Education Governing Policies & Procedures, Section V.I.3.(a)

BACKGROUND / DISCUSSION
Since July 1976, the State Board of Education has held an agreement with UUSOM to reserve a specific number of seats for Idaho residents at the in-state tuition and fee rate established by UUSOM for residents of Utah. The Board makes annual fee payments in support of such Idaho resident students enrolled under this agreement which is intended to cover the difference between resident and non-resident tuition and fees. The current agreement expires at the conclusion of the 2013-2014 academic year.

Each academic year, UUSOM reserves eight new positions in its entering class pursuant to this Agreement for Idaho resident students seeking an M.D. degree. The regular course of instruction to receive an M.D. degree at UUSOM is four years. Therefore, up to 32 Idaho-sponsored students are enrolled at UUSOM at any time during each academic year.

The total annual support fee that the Board agrees to pay UUSOM for each Idaho resident student enrolled at UUSOM under this agreement for the 2013-14 academic year is $40,800. Thereafter, the annual support fee for each Idaho resident student shall increase by the Higher Education Cost Adjustment (HECA) index.

The Office of the State Board of Education and the UUSOM have reviewed and revised the contract, which is effective for a period of three years ending with the 2016-2017 academic year. Material changes include:

Section 1(a): Language is removed regarding determination of residency by Idaho State University or the University of Idaho. Board counsel advises that for purposes of the agreement it is sufficient to provide that the SBOE will determine the eligibility of Idaho resident students who wish to participate in the cooperative program covered by the Agreement.

Section 1(c): Clarifies that Idaho-sponsored students will not be granted a leave of absence to participate in UUSOM’s joint MD/PhD program. Furthermore, an Idaho-sponsored student is limited to one leave of absence, not to exceed 12 months, during the student’s four years as a medical student.
IMPACT
All changes contemplated in this agreement have been internally vetted and approved by UUSOM.

Renewal of the agreement will continue to provide a cost-effective way for Idaho students to attend medical school.

ATTACHMENTS
Attachment 1 – UUSOM agreement - Redline Version Page 3
Attachment 2 – UUSOM Annual Report Page 9

STAFF COMMENTS AND RECOMMENDATIONS
Staff recommends approval.

BOARD ACTION
I move to approve the three-year agreement extension between the University of Utah School of Medicine and the State Board of Education for the provision of a total of up to 32 medical school seats annually, and to authorize the Executive Director of the State Board of Education to execute the agreement in substantial conformance with the terms of the agreement set forth in Attachment 1.

Moved by____________ Seconded by____________ Carried Yes____ No____
FOR THE PROVISION OF MEDICAL SCHOOL OPPORTUNITIES TO RESIDENTS OF THE STATE OF IDAHO

This Agreement ("Agreement") is executed this _____ day of ______________, between the University of Utah, a body politic and corporate of the State of Utah, on behalf of its School of Medicine, located in Salt Lake City, Utah (hereinafter referred to as the “School”), and the Idaho State Board of Education, located in Boise, Idaho, on behalf of the state of Idaho (hereinafter referred to as "SBOE") (School and SBOE may be referred to hereafter collectively as the parties).

WHEREAS, the School has an established, fully accredited, four-year M.D. degree-granting School of Medicine, and no such degree is offered by an Idaho public higher education institution; and

WHEREAS, the parties here to wish to enter into a cooperative program under which the School will reserve, for qualified Idaho resident students, positions in the School at the in-state tuition and fee rate established by the School for residents of the state of Utah, and SBOE will make annual support fee payments in support of such Idaho resident students enrolled pursuant to this Agreement, which cooperative program will benefit both parties in reducing costs and in other ways contemplated in this Agreement, and will improve other benefits to both parties; and

WHEREAS, the School is dedicated to the improvement of health care delivery in the Intermountain region, which includes the states of Utah and Idaho; and

WHEREAS, the parties here to anticipate that this cooperative program will result in significant progress in improving health care delivery, especially rural health care and primary health care, in the Intermountain region.

NOW THEREFORE, it is mutually agreed as follows:

1. Positions Reserved for Idaho Resident Students.

   (a) For each academic year of School, each academic year upon agreement of both parties—the School will reserve eight (8) new positions in its entering class pursuant to this Agreement for Idaho resident students seeking an M.D. degree. The SBOE will determine the eligibility of Idaho resident students who wish to participate in the cooperative program covered by this Agreement. However, Idaho students applying to the joint MD/PhD program at the School are not eligible to participate in the cooperative program established by this Agreement. The SBOE delegates to Idaho State University (ISU), located in Pocatello, Idaho, the responsibility of designating those students who meet Idaho residency criteria and who are eligible to receive the benefits of this Agreement, except that applicants to the School who also apply to the University of Washington School of Medicine only will be required to submit an Idaho Residency Determination Worksheet to certify residency through one institution (either ISU or the University of Idaho (UI), located in Moscow, Idaho).
automatically provides certifications for verification to the School. The regular course of instruction to receive an M.D. degree at the School is four (4) years.

(b) If an Idaho resident enrolled at the School pursuant to this Agreement permanently withdraws or is dismissed prior to completion of the M.D. degree, then the next academic year the School may accept another eligible Idaho resident student who is currently enrolled in the School’s program in consultation with the SBOE. In such event, an Idaho resident student shall assume the vacant position of the Idaho resident student who has withdrawn or was dismissed. However, such student shall only receive the benefits of this Agreement for the remaining years of eligibility for the Idaho resident student who withdrew or was dismissed prior to completion of the M.D. degree.

(c) An Idaho resident enrolled at the School pursuant to this Agreement may request a leave of absence with the approval of both the School and SBOE, which will generally be granted for purposes such as participating in an academic program intended to further such student's training in the field of medicine, or for cases of significant hardship, and to the extent such leave is otherwise consistent with the practices and policies of the School. A student will not be granted a leave of absence in order to pursue studies in desiring to enroll in the joint MD/PhD program at the School. shall be not eligible for a leave of absence. A leave of absence shall not exceed 12 months, and a student may only take one leave during their four (4) years as a student at the School. A leave of absence requires prior written approval by both the School and SBOE. In such event, an Idaho resident student shall not be permitted to assume the temporary vacant position of the Idaho resident student on leave of absence, without the approval of the SBOE. At no time will any student be sponsored by the SBOE for more than a total of four (4) academic years (the leave of absence year, if applicable, does not constitute an academic year).

(d) Unless the student withdraws or is dismissed as contemplated in paragraph 1(b) above, each Idaho resident student enrolled at the School under this cooperative program (including a student on leave of absence pursuant to paragraph 1(c) above) shall be permitted to continue at the School until such student has finished the regular course of instruction required to receive the M.D. degree (i.e.: four (4) years of academic instruction); notwithstanding, funding for such student under this Agreement is subject to the limitations described in Section 7 of this Agreement and the student’s obligations with respect to the payment of tuition as described at Section 5 of this Agreement. The regular course of instruction may be increased or decreased for a particular student on a case by case basis as agreed upon by the School and SBOE. At no time will any student be sponsored by the SBOE for more than a total of four (4) years (the leave of absence year, if applicable, does not constitute an academic year).

(e) An Idaho resident student who is offered and accepts a reserved position shall, from that point forward in such student’s course of instruction at the School, be considered a resident of Idaho, notwithstanding establishment of legal residence in the state of Utah.
(f) Except as otherwise permitted by this Agreement, the number of positions reserved each year may be increased or decreased only by mutual written consent of both parties to this Agreement.

2. **Admission Requirements.**

(a) All Idaho resident students designated as eligible for benefits under this Agreement must apply for admission to the School in accordance with the regular admission procedures of the School, which includes the application process of the American Medical College Application Service, and the screening criteria and interview procedures developed by the School.

(b) The School agrees to designate at least two Idaho licensed physicians approved by SBOE to serve on the School’s Admissions Selection Committee for the purpose of assisting in the selection of the Idaho resident students to be admitted pursuant to this Agreement. The Assistant Dean for Idaho Affairs will also serve as a member of such Admissions Selection Committee. The Idaho licensed physicians will also participate as full voting members in selection deliberations involving Idaho resident student applicants. Idaho physicians may participate by teleconference but if they attend in person, then the SBOE will be responsible for all SBOE pre-approved travel expenses related to the Idaho licensed physicians serving on the Admissions Committee, in accordance with Idaho State Board of Examiner’s travel policies. The Dean of the School, or her designee, shall have final authority over the acceptance or rejection of Idaho student applicants.

3. **Rules and Regulations.** Except as otherwise expressly provided for in this Agreement, Idaho resident students holding reserved positions shall be subject to the same academic, disciplinary, and other rules, regulations, requirements, and privileges that are applicable to all other students in the School.

4. **Clinical Rotations in Idaho.** The School will encourage Idaho sponsored students to participate in shadowing Idaho physicians after the first year of school and will offer electives during the senior year of school. As part of the regular course of instruction for an M.D. degree, students participate in ambulatory clinical rotations during the third year of training. The parties agree that the Idaho resident students enrolled pursuant to the cooperative program covered by this Agreement shall serve such ambulatory clinical rotations at facilities in the state of Idaho, to the extent such opportunities are reasonably available. Upon a showing of hardship by the Idaho resident student, this requirement that an ambulatory clinical rotation occur at a facility in the state of Idaho may be waived by the SBOE. The coordination of such ambulatory clinical rotations shall be the responsibility of the School. The School shall report annually to the SBOE on the status of student rotations in the state of Idaho.

5. **Tuition.** Idaho resident students who are enrolled under the provisions of this Agreement shall be assessed the tuition and fees established for Utah resident students. In addition, Idaho resident students may be assessed any additional tuition
and fees that may be required by law, required by SBOE, or are otherwise necessary to cover any shortfall between the Annual Support Fee (as defined below) and the tuition and fees established for non-resident students.

6. Annual Support Fee and Payments.

(a) The total annual support fee that SBOE agrees to pay the School for each Idaho resident student enrolled in the School under this cooperative program for the 2014-125 academic year shall be $38,758,400 per Idaho resident student which is the amount appropriated by the State of Idaho (the “Annual Support Fee”). Thereafter, the parties agree that the Annual Support Fee for each Idaho resident student shall increase by an amount which is equal to the increase in the Higher Education Cost Adjustment (HECA) index. The index used shall be the published HECA index for the most recently available year preceding the academic year.

(b) The SBOE’s annual support fee obligation each academic year shall be for Idaho resident students enrolled in the cooperative program. The annual support fee for any student(s) on a leave of absence pursuant to Section 1(c) of this Agreement shall be placed in an escrow account by the School to be used upon a student’s return to the School. If a student does not return to the School, moneys in the escrow account will be returned to the State of Idaho through the SBOE consistent with the terms of Section 8 of this Agreement.

(c) The SBOE agrees to make the annual support fee payment to the School within thirty (30) days after receiving from the School the annual support fee statement, which details the Idaho resident students enrolled under this Agreement.

(d) SBOE’s payment obligation for each Idaho resident student enrolled in the School pursuant to this Agreement will continue for the length of enrollment of each Idaho resident student in the School. The receipt of any scholarship by an Idaho resident student, including any federal scholarship, will not reduce the SBOE’s obligation under this Agreement.

(e) The School agrees to collect the incentive fee assessed by SBOE pursuant to Idaho Code §33-3723, establishing the Idaho Rural Physician Incentive Program. Each academic year SBOE will notify the School of the amount to be collected from each Idaho resident student enrolled pursuant to this cooperative program for that school year. The School will collect the fee from all Idaho sponsored students, and promptly transfer such funds to SBOE.

7. Legislative Appropriation.

(a) SBOE agrees that it will include support obligations which it anticipates will become due as a result of this Agreement in each budget submitted to the Idaho Legislature, and will use good faith efforts to secure appropriations to meet such anticipated obligations. However, if the Idaho Legislature fails to appropriate an
amount of money sufficient to meet the total amount due to the School for an academic year, then SBOE will not be obligated for support fee payments beyond the funds appropriated. If the Idaho Legislature appropriates an amount of money insufficient to meet the total amount due to the School for an academic year, then each Idaho resident student who determines to remain in the program shall be responsible for the difference between the annual support fee and the per student appropriation.

(b) If the Idaho Legislature fails to make any appropriation or otherwise determines to discontinue Idaho's participation in this cooperative program, then in such event the School will not be obligated to reserve any positions in future entering classes, and the School agrees to permit each Idaho resident student enrolled under this Agreement to continue in the course of instruction leading to the M.D. degree, so long as a satisfactory academic record is maintained and the Idaho resident student pays the applicable tuition and fees. Under these circumstances, the School will have the right to charge each Idaho resident student the tuition and fees established for non-resident students.

8. Refunding of Annual Support Fee. In the event an Idaho resident student enrolled pursuant to this Agreement is terminated during an academic year for any reason, then the School will refund to SBOE the annual support fee payment made on behalf of such student, subject to the same rules and regulations as apply generally to the refund of tuition and fees to medical students enrolled in the School that terminate their course of study during an academic year.

9. Information to SBOE. The School will submit an annual report to SBOE on or before August 31 of each year of this Agreement, which shall include the names of students accepted for the upcoming school year, and a report on the academic progress of continuing students enrolled under this Agreement. From time to time, as information is necessary for the successful operation of this cooperative program, the School will, upon reasonable request, make additional reports to the SBOE. Such information is limited to that permitted to be disclosed by the School to the SBOE under the Family Education Rights and Privacy Act, 20 U.S.C.A. § 1232g, as amended.

10. Term and Termination. The effective date of this Agreement shall coincide with the beginning of the 2014-2015 academic year of the School, and will expire at the conclusion of the 2016-2017 academic year of the School. Notwithstanding, this Agreement may be terminated by either party prior to the expiration date for any reason upon 30 days written notice to the other party. The parties agree that the expiration or termination of this Agreement shall not affect: (a) the School’s obligation with respect to Idaho resident students enrolled under this Agreement at the time of expiration or termination who have not finished their course of study, and (b) SBOE’s support fee obligation with respect to Idaho resident students enrolled under this Agreement at the time of expiration or termination who have not finished their course of study, unless such students withdraw or are dismissed as discussed in Section 1(b) hereinabove. This Agreement may not be modified or amended except by a written instrument executed by both parties. If full payment by the SBOE is not made by the due date for
such payment, then the Agreement may be terminated immediately, except as it applies to individual Idaho resident students currently enrolled at the School at the time of such termination.

11. Notice. All notices and other communications shall be addressed as follows:

Idaho State Board of Education
Dr. Mike Rush
Executive Director
Office of the State Board of Education
PO Box 83720
Boise, ID 83720-0037

University of Utah
Dr. Vivian S. Lee
Senior Vice President for Health Sciences
University of Utah School of Medicine
50 North Medical Drive
Salt Lake City, UT 84132-0001

IN WITNESS WHEREOF, the parties hereto, by their authorized representatives, have executed this Agreement on this _____ day of ________________.

IDAHO STATE BOARD OF EDUCATION
Mike Rush
Executive Director
Idaho State Board of Education

UNIVERSITY OF UTAH
Vivian Lee
Sr. Vice President for Health Sciences
University of Utah
# Table of Contents

**Administrative Offices** .................................................................................................................. 2

**Overview of the Four Year Curriculum** .......................................................................................... 3
  1st year ........................................................................................................................................... 3
  2nd year ......................................................................................................................................... 4
  3rd year .......................................................................................................................................... 5
  4th year .......................................................................................................................................... 6

**Idaho Student Affairs Update** ...................................................................................................... 7
  Introduction ................................................................................................................................. 7
  Admissions ................................................................................................................................. 7
  Academic Requirements ............................................................................................................. 8
  Required Activities ...................................................................................................................... 8

**Admission Report** ......................................................................................................................... 10

**Hometowns** .................................................................................................................................. 11

**Rural Observational Experience** ................................................................................................. 12
  Statement from participant ........................................................................................................... 12

**Clinical Medical Education in Idaho** .......................................................................................... 13
  Family Practice Clinical Clerkship ............................................................................................. 13
  Family Medicine Volunteer Clinical Faculty in Idaho ............................................................... 14
  Internal Medicine Clinical Clerkship .......................................................................................... 15
  Internal Medicine Volunteer Clinical Faculty in Idaho ............................................................. 15
  The Public / Community Project ................................................................................................. 16

**Other Clinical Medical Education Opportunities in Idaho** ....................................................... 17
  Family Medicine (Primary Care) Preceptorship ......................................................................... 17

**Financial Report** .......................................................................................................................... 19

**School of Medicine Graduate Report** ......................................................................................... 21
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Salt Lake City, UT 84132
Mission Statement

The University of Utah School of Medicine serves the people of Utah and beyond by continually improving individual and community health and quality of life. This is achieved through excellence in patient care, education, and research. Each is vital to our mission and each makes the others stronger.

Overview of the Four Year Curriculum

Year 1

Phase 1: Foundations of Medicine
This 17-week phase includes the medical science, medical arts and clinical skills that students will require before beginning in clinics and Phase 2 units. Each week of Phase 1 will have a predominant theme. Anatomy (embryonic, microscopic and gross, including cadaver dissection), physiology, pharmacology, data analysis, metabolism and nutrition will be taught in relation to the weekly themes. The medical science components of the curriculum will heavily depend upon an integrated textbook: Human Anatomy & Physiology, 8th edition by Marieb and Hoehn. Students will be expected to thoroughly understand the content of this textbook, as well as others used in the phase, at the completion of Phase 1. Students will develop patient interview and physical examination skills over the course of Phase 1 to prepare them for their Longitudinal Clinical Experience which begins in Phase 2. Students will engage in professional development through self-exploration and self-assessment activities across Phase 1 as they examine the different psycho-social and technical dimensions of patient care.

Phase 2: (2.1) Molecules, Cells and Cancer
This 9-week unit, beginning in early January, integrates molecular and cell biology with genetics, hematology, cancer biology and basic oncology. It includes a strong component of translational research as we explore how we know what we know about the molecular basis of cancer and other genetic diseases. Students begin their longitudinal clinical experience at the start of this unit. The clinical skills taught include breast, pelvic and male genital exams.
Phase 2: (2.2) Host and Defense
This 9-week unit begins in March and introduces infectious disease, the biology of the immune system, the body's response to pathogens, and antimicrobial therapy. Instruction centers on common clinical presentations, beginning with fever and then moving through major body systems while addressing increasingly complicated diseases, from sore throat to AIDS.

Clinical Experience
Students begin their Longitudinal Clinical Experience (two half days per month in a primary care clinic) during Phase 2 of Year 1.

Year 2

Phase 2: (2.3) Brain and Behavior
This 9-week unit begins in August of the second calendar year. The unit integrates basic neuroanatomy and neurophysiology with the clinical disciplines of neurology, psychiatry, pathology and pharmacology. The unit provides the students with the conceptual framework necessary to recognize common neurological and mental health issues.

Phase 2: (2.4) Circulation, Respiration and Regulation
This is a 12-week unit that runs from mid-October to mid-December. The unit is designed to help students develop the clinical medicine skills and medical science knowledge to be able to propose rational differential diagnoses and diagnostic and treatment strategies for clinical problems affecting the hematologic, circulatory, respiratory, and renal organ systems.

Phase 2: (2.5) Metabolism and Reproduction
This 9-week unit runs from early January to late March. It begins with the pathophysiology of the gastrointestinal tract and the digestion/absorption of nutrients. The basic metabolism covered in phase 1 is reviewed and built upon as we focus on the liver. Obesity, metabolic syndrome and insulin resistance lead into endocrinology. From the sex hormones, we transition to reproduction. Clinical reasoning skills, with a particular focus on causes and treatment of abdominal pain, will be emphasized throughout the unit.

Phase 2: (2.6) Skin, Muscle, Bone and Joint
Upon completion of this 8-week unit, students will be able to name, recognize and describe common dermatologic and musculoskeletal diseases, including the basic science foundations of each condition. In addition, they will describe diseases’ clinical presentation and pathophysiology and define terms used on physical, microscopic and radiologic examinations. Students will be able to gather essential information from clinic patients presenting with dermatologic and musculoskeletal complaints and produce accurate, clear and organized documentation of patient encounters in the form of SOAP notes and complete H&P’s. This unit provides students with the knowledge and skills necessary to reason through case-based vignettes as seen in USMLE in order to prepare them for USMLE Step I and Phases III and IV.

Phase 2: (2.7) Life Cycle
This 2 week unit teaches students to apply knowledge of the normal life cycle emphasizing on transitions within the life span according to its place in clinical medicine, medical science, and medical arts.
Clinical Experience

Students continue their Longitudinal Clinical Experience (two half days per month in a primary care clinic) and begin their Subspecialty Clinic Experience (one half day per month in a variety of subspecialty clinics) during Phase 2 of Year 2.

Year 3

In the third year, emphasis is on the integration of basic science knowledge with clinical, ethical, diagnostic, and problem solving skills. Clinical clerkships, during which students learn patient management as members of the health care team, include family practice, internal medicine, obstetrics and gynecology, pediatrics, psychiatry, and surgery. Students also take a Topics of Medicine course, which reviews a series of simulated patients with common medical problems seen in ambulatory medicine. The student is also required to complete a four-week clinical neurology clerkship between the end of the sophomore year and the end of the senior year. Each student must also satisfactorily complete an objective standardized clinical examination (OSCE) administered at the end of the 3rd year prior to being promoted to the 4th year.

Family Medicine Clinical Clerkship

Four weeks with a community based faculty family medicine preceptor. The majority of the time is spent with the preceptor in the hospital, office, nursing homes, and on house calls. Time is also spent learning about and experiencing other elements of the health care system in the community served by the preceptor.

Internal Medicine Clinical Clerkship

Twelve weeks divided into one six-week inpatient rotation taken in the first half of the year and a second six-week rotation in the second half of the year. The second rotation consists of 3 weeks of inpatient responsibilities and 3 weeks in an ambulatory clinic. Inpatient clerkships consist of case work and rounds on wards of the University of Utah Medical Center, LDS Hospital, or the VA Medical Center.

Neurology Clinical Clerkship

Four weeks divided into two weeks inpatient and two weeks outpatient experiences. The inpatient rotation at the University of Utah Medical Center, Primary Children’s Medical Center, or VA Medical Center consists of direct patient care, daily ward rounds, brain cutting sessions, procedures such as lumbar puncture, participation in clinical conferences, and attendance at specialty clinics. The outpatient experience occurs in the multiple sclerosis, muscle, and neurology outpatient clinics.

Obstetrics and Gynecology Clinical Clerkship

Six weeks of inpatient and outpatient experience at the University of Utah Medical Center and LDS Hospital. Time is also spent in lectures, seminars, and review of gynecological pathology.

Pediatrics Clinical Clerkship

Six weeks divided into two three-week blocks. Three weeks are spent on the inpatient wards at Primary Children's Medical Center (PCMC). The other three-week block includes one week on a pediatric subspecialty service and the other two weeks at the General Pediatric Clinic at the University of Utah Medical Center, and the newborn nursery at the University of Utah Medical Center.
Psychiatry Clinical Clerkship
Six weeks emphasizing inpatient care at the University of Utah Medical Center, VA Medical Center, Primary Children’s Medical Center, and the University of Utah Neuropsychiatric Institute. Students attend civil commitment proceedings, electroconvulsive therapy, outpatient clinics, and consultation/liaison rounds. One day each week is devoted to a core lecture series and case conferences. Each student spends one week on the consultation/liaison service and one half day per week in the office of an outpatient therapist.

Surgery Clinical Clerkship
Eight weeks of ward work, operating room experience, lectures, case presentations, and rounds at the University Medical Center, LDS Hospital and VA Medical Center. Students spend six weeks on general surgery and two weeks in specialty areas.

Year 4
The fourth year track system at the University of Utah School of Medicine utilizes a learning community model to deliver medical education and career mentoring necessary to prepare fourth year medical students for their internship.

There are four tracks that students can select from—Acute Care, Applied Anatomy, Medical Sciences and Specialties, and Primary Care. There is a specific set of specialties designated to each track (e.g. the Primary Care track consists of students anticipating matching into Pediatrics, Internal Medicine, Family Medicine, etc.) Students select their track designation in the middle of their Phase III clerkships as they begin to plan their Phase IV courses. Specialty specific mentors are designated for each specialty within each track and are available to help with course scheduling and career mentoring. Students are allowed to change their track designation at any time.

All students graduating from the University of Utah School of Medicine must meet a core set of requirements for graduation as determined by the Curriculum Committee—such as completion of Phases I-III, a local Sub-Internship rotation during the fourth year, 32 weeks of total credits in the fourth year and a minimum number of ambulatory and clinical credits. Additionally all students must participate in two required courses in the fourth year—the Longitudinal Preparation for Internship (LPIC) course and the Transition to Internship Course (TIC). Each track has its own faculty Track Director who is responsible for the content of the track’s LPIC and TIC.

The LPIC is a longitudinal 2 credit course that runs July through March and meets for one afternoon every other week. Students are excused from their clinical duties to attend the LPIC. The curriculum emphasizes career mentoring, preparation for the Match, and the delivery of curriculum thread content. Students participating in away rotations or residency interviews are excused from the LPIC for that afternoon. Shared portions of the curriculum are delivered to the entire class. Some portions are delivered to individual tracks and individual specialties in small group activities.

The TIC is a 4 credit course that runs Monday through Friday for four weeks in April after the students have matched. The course is intended to be a capstone course for their medical school career. The curriculum emphasizes clinical reasoning skills, psychomotor task training, team communication, and the delivery of curriculum thread content needed for the student to be successful in their matched internship. Hands-on task trainers, high fidelity simulation models, inter-professional education, role playing, small group discussions and formal didactic lectures are used to deliver content. Similar to the LPIC, shared portions of the curriculum are delivered.
to the entire class and some portions are delivered to individual tracks and individual specialties.

Threads

The medical arts curriculum is focused on the integration of 10 threads into the core curriculum. The threads are: interprofessional education, nutrition, women's and gender health, geriatrics, health care systems, public and global health, medical ethics and humanities, translational research, biomedical informatics, and cultural diversity.

Idaho Student Affairs Update

Introduction

Program Leadership

Dr. DeVon C. Hale is a Board Certified physician in Internal Medicine, Infectious Diseases, and Microbiology. Upon completion of his residency in 1978 and until 1984, he was in private practice in Idaho Falls and held the positions of Medical Director of the Microbiology Laboratory and a Consult in Epidemiology at the Idaho Falls Consolidated Hospitals. He moved to Utah in 1984, accepting a faculty appointment with the University of Utah School of Medicine. In addition to his faculty appointment in Internal Medicine and Pathology, since 1995 Dr. Hale has been the Assistant Dean for Idaho Student Education.

Dr. Ilana Shumsky is a Board Certified Internal Medicine physician. She earned her M.D. degree from UCLA and completed her Internal Medicine Residency at the University of Utah. She was a member of the University of Utah faculty as Clerkship Director for Internal Medicine for three years before moving to Boise, Idaho. She currently is on staff at the Boise VAMC and has a clinical faculty appointment at the University of Washington. Additionally, she is the Director of Idaho Student Programs for the University of Utah. In this capacity, she coordinates the placement of Idaho students from the University of Utah medical school into clinical practices within the state of Idaho.

Admissions

Our goal is to select the most capable students to attend our school and to have a balanced, but heterogeneous group that will excel in both the art and science of medicine. We recognize that a diverse student body promotes an atmosphere of creativity, experimentation and discussion that is conducive to learning. Exposure to a variety of perspectives and experiences prepares students to care for patients in all walks of life and in every segment of society.

Considered individually, age, color, gender, sexual orientation, race, national origin, religion, status as a person with a disability, status as a veteran or disabled veteran are not determinants of diversity and are not identified as unique characteristics during the admissions process.

MCAT scores and grades are carefully scrutinized and are an important part of the application process. All grades received for college credit are included in the AMCAS GPA calculation. If a course is repeated, both grades received for that course are calculated into the GPA. Pass/Fail grades received for college credit are not included in the AMCAS GPA calculation.
As important as grades and test scores are, by themselves they do not predict who will be successful in medical school. The demands of medical education and life as a physician are not for everyone. We consider how the applicant balances outside activities and responsibilities with schoolwork to be an indicator of ability to deal with the rigors of life as a physician. The committee is interested in the applicant's motivation for attending medical school and his/her understanding of the medical profession. Commitment to community service, ethical behavior, compassion, leadership ability and communication skills are important characteristics of physicians. Applications and interviews assist us in evaluating these qualities. We expect applicants to be courteous, respectful and professional at all times.

We evaluate applications against minimum and average standards in 8 specific areas. Applicants must achieve at least the minimum level of performance in all 8 areas and be average or above in 5 out of the 8 areas in order to proceed in the admissions process. Successful applicants distinguish themselves with outstanding performance in one or more of these areas. The 8 areas are listed below.

**Academic Requirements**

**Grade Point Average (GPA):** The minimum acceptable GPA is 3.0. Applicants with a science, non-science or overall GPA below 3.0 will not be considered. All grades received for college credit are included in the AMCAS GPA calculation. If a course is repeated, both grades received for that course are calculated into the GPA.

To determine average criteria, the applicant's GPA is compared to the average GPA of students who have gone on to attend medical school from the institution granting the applicant's highest degree.

**Medical College Admission Test (MCAT):** All applicants are required to take the MCAT within 3 years of their application. Example: For applications for the class entering medical school in 2013, scores will be accepted from tests taken in 2012, 2011 and 2010. Tests taken after September will not be considered for the current application year.

The minimum acceptable score for each section, (physical science, biological science and verbal reasoning) of the MCAT examination is 7. The average score for entering freshmen is 10 in each section. If the test is taken more than once within 3 years of application, the best score for each section will be considered.

**Required Activities**

**Extracurricular:** Extracurricular activities are defined as activities outside the usual duties of a full-time job and/or school. The committee is interested in how applicants deal with the demands of their lives outside of the classroom in activities such as work, athletics, family, church, clubs, hobbies, volunteering and other special interests. This is a strong indicator of how well an applicant will handle responsibilities and deal with stressful situations. It also predicts how well they will handle the difficult demands of medical school.

- The minimum requirement is some involvement in outside activities.
- The average applicant devotes 20 hours per week during each of the 4 years prior to entering medical school.
Community/Volunteer Service: Community/Volunteer service is defined as involvement in a service activity without constraint or guarantee of reward or compensation. The medical profession is strongly oriented to service in the community. Applicants should demonstrate a commitment to the community by involving themselves in service and volunteer activities. Work performed in service learning courses and community service performed as part of employment does not satisfy this requirement.

- The minimum requirement is 36 hours.
- The average applicant devotes 48 hours during each of the 4 years prior to entering medical school.

Leadership: Leadership is defined as a position of responsibility for others, with a purpose to guide or direct others. Dedication, determination, ability to make decisions and a willingness to contribute to the welfare of others are indicators of one's ability to succeed in medicine. Individuals with these characteristics readily accept positions of leadership and are an asset to their community and profession. Leadership capacity can be demonstrated in a variety of ways. Positions in employment, church, community and school organizations including coaching, tutoring and mentoring will satisfy this requirement.

- The minimum leadership requirement is 1 leadership experience lasting 3 months during the 4 years prior to matriculation.
- The average applicant has 3 different leadership experiences each lasting 3 months during the 4 years prior to matriculation.

Research: Research is defined as involvement in a scholarly or scientific hypothesis investigation that is supervised by an individual with verifiable research credentials. Research may be in any discipline and performed at any site.

Research is the foundation of medical knowledge. We consider participation in research activities to be an important part of the preparation for medical school. Physicians depend on medical literature to remain current in their fields. Most physicians participate in research at some point in their careers. Research experience may be in any discipline and performed at any site. However, it must involve the testing of a hypothesis.

Research performed as part of a class is not acceptable, unless the course was in independent research and the applicant completed independent, hypothesis-based research under the supervision of the professor. Research completed for a graduate thesis is acceptable. Applicants should be able to describe their project, the hypothesis investigated, and their role in the conduct of the research.

- The minimum requirement is 4 hours per week for 2 months or the equivalent of 32 hours.
- The average experience is 4 hours per week for 3 months or the equivalent of 48 hours.

Physician Shadowing: Physician shadowing is defined as the observation of a physician as s/he cares for and treats patients and carries out the other responsibilities of medical practice.

Applicants should spend enough time directly shadowing physicians to understand the challenges, demands and lifestyle of a medical doctor. Shadowing must be done with allopathic (M.D.) or osteopathic (D.O.) physicians in their practice in the United States. Time spent shadowing residents, physician assistants, podiatrists, veterinarians, nurses, EMT’s, PhD’s etc., will not be considered. It is our recommendation that applicants shadow several physicians in varied specialties.
• The minimum requirement is 8 hours shadowing a physician(s) through all the activities of an average day.
• The average applicant spends 24 hours with a physician(s).

**Patient Exposure:** Patient exposure is defined as direct interaction with patients and hands-on involvement in the care of conscious people in a health care related environment, attending to their health maintenance/progression or end of life needs. It is important that the applicant be comfortable working with and around people who are ill.

Direct patient exposure can be gained in a variety of ways. Patient contact must include patients other than family members and friends and does not include indirect patient care such as housekeeping (cleaning operating rooms or patient rooms) working at the hospital information desk, or working in a pharmacy.

• The minimum patient exposure requirement is 4 hours per week for a period of 2 months or the equivalent of 32 hours.
• The average applicant spends 4 hours per week in patient exposure for 3 months or the equivalent of 48 hours.

*Note: Physician shadowing and caring for friends and family members cannot be used to meet this requirement.*

---

### Admissions Report

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# Hometowns

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Rural Observational Experience

A four to eight week non-credit observational experience for students is offered between their first and second year of medical school. Students can shadow a rural doctor for up to 8 weeks. Students receive a stipend and travel expenses.

The following student completed the observational experience in Twin Falls, from June 10- July 5, 2013:

Summer observational experience
By
Martin de la Prensa Pothier – MS 2016

This past summer I was able to participate in the Rural Shadowing Program in Twin Falls, Idaho. This opportunity allowed me to experience what a rural family physician does in a typical day. I was fortunate to be able to work with Drs. Dan and Jen Preucil and see the contrast in the diversity of patients that each of them works with.

Dr. Jen Preucil worked in a small outpatient clinic where she predominantly managed women’s health issues and well-child exams. When shadowing her I was able to learn a lot about the importance of educating patients about the need for healthy lifestyle choices and screening for common disease. I also enjoyed learning about phases of childhood development and how to use this information to help parents understand the changes that their child is experiencing.

Dr. Dan Preucil worked in the community hospital where he saw a wide range of patients and ailments. Of particular interest to me was his work with the local refugee population. He was able to overcome language barriers with the use of telephone-interpreters to provide them the same quality care that he gives to the rest of his patients.

This experience has contributed to my medical education by allowing me to develop my ability to conduct patient interviews and increase my physical examination skills. It was also inspiring to see the relationships that these doctors have developed with their patients over time. This has further increased my desire and motivation to practice in a rural setting.
Clinical Medical Education in Idaho

During an Idaho medical student’s third year, two of the required rotations, the Family Practice Clinical Clerkship and the Internal Medicine Clinical Clerkship, are completed in Idaho. While the Family Practice Clinical Clerkship is four weeks with a community based or faculty family practice preceptor, the Internal Medicine Clinical Clerkship is twelve weeks divided into one six-week inpatient rotation taken in the first half of the year and a second six-week rotation in the second half of the year. It is during the second six-week rotation that the student travels to Idaho for three weeks to work in an ambulatory clinic. Additionally, during an Idaho medical student’s fourth year, the student completes a four-week Public/Community Project. This project can be completed in Utah or Idaho.

Family Practice Clinical Clerkship

Overview: The required, four-week Family Practice Clinical Clerkship exposes the medical student to the role and capabilities of family physicians as primary care doctors in their local settings. They are also introduced to other elements of the health care delivery system in the community which supports and compliments the services provided by the primary care physician.

Educational Objectives: The student will:
1. Demonstrate basic competency in history taking, physical examinations, procedural skills, and clinical decision making as applied to the wide range of problems seen in family medicine.
2. Be able to discuss the diagnosis of common acute undifferentiated problems while taking into account disease prevalence, geographic factors, the socioeconomic structure of the community, and the psycho-social factors surrounding the patient.
3. Be able to implement a reasonable health maintenance plan for patients of various ages and of either sex.
4. Be able to describe the family physician’s role as the coordinator of health care for individuals and families in the overall community, and in the care of chronic and complicated problems.
5. Be able to use the problem oriented medical record, discuss the cost effectiveness in primary care, and show some understanding of risk management quality assurance and ethical issues in family practice.

Activities: The student will spend approximately 70% of time in clinical activities, including office, hospital, nursing home, and home visits with their preceptor. The remaining 30% will consist of time spent learning and experiencing other elements of the health care system in the preceptor’s community (hospital and medical staff issues, public health agencies, occupational and environmental health risks), as well as independent study.
Preceptors/Site Requirements: The preceptor must be board certified in family medicine, hold a University of Utah Volunteer Clinical Faculty appointment or Volunteer Preceptor agreement with the Department Family and Preventative Medicine.

Evaluations: The preceptor will evaluate the students with regards to their personal and interpersonal qualities, fund of knowledge, and clinical skills. The evaluation will be submitted to the Family Practice Student Programs Office within a few weeks of completion of the student's clerkship.

Family Medicine Volunteer Clinical Faculty in Idaho
2-13

<table>
<thead>
<tr>
<th>Physician</th>
<th>Location</th>
<th>Phone</th>
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<tbody>
<tr>
<td>Jaren Blake, MD</td>
<td>Bingham Memorial Family Medicine 98 Poplar Street 98 Poplar Street Blackfoot, ID 208-782-2999</td>
<td></td>
</tr>
<tr>
<td>Thomas S. Call, DO</td>
<td>Bingham Memorial Hospital 98 Poplar MOB 1st floor Blackfoot, ID 83221 208-782-3700</td>
<td></td>
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<tr>
<td>Waj E. Nasser, MD</td>
<td>1520 W State St Boise, ID 83702 208-947-7700</td>
<td></td>
</tr>
<tr>
<td>William Crump, MD</td>
<td>St Luke’s Family Health 3090 Gentry Way Ste 200 Meridian, ID 83642 208-887-6813</td>
<td></td>
</tr>
<tr>
<td>Julie Gunther, MD</td>
<td>St Luke’s Family Medicine Park Center 701 East Parkcenter Blvd Boise, ID 83706 208-381-6500</td>
<td></td>
</tr>
<tr>
<td>Andrew Holtz, DO</td>
<td>Praxis Medical Group 3080 East Gentry Way Ste 200 Meridian, ID 83642 208-884-3770</td>
<td></td>
</tr>
<tr>
<td>Jason Ludwig, DO</td>
<td>Pioneer Family Medicine 13150 West Persimmon Lane Boise, ID 83713 208-938-3663</td>
<td></td>
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<tr>
<td>Michael Maier, MD</td>
<td>Saint Luke’s Medical Center 3301 North Sawgrass Way Boise, ID 83704 208-376-9592</td>
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<tr>
<td>Suzanne Allen, MD</td>
<td>Boise Family Medicine Residency 777 North Raymond St Boise, ID 83704 208-367-6047</td>
<td></td>
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<tr>
<td>Elizabeth A Rulon, MD</td>
<td>Boise Family Medicine Residency 777 North Raymond St Boise, ID 83704 208-367-6047</td>
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<tr>
<td>R. Bret Campbell, DO</td>
<td>1501 Hiland Ave Ste A Burley, ID 83318 208-878-9432</td>
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<tr>
<td>Lorene Lindley, MD</td>
<td>1112 West Ironwood Dr Coeur d’Alene, ID 83814 208-664-8818</td>
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<tr>
<td>Eddie Rodriguz, MD</td>
<td>Valley Family Health Clinic (Emmett Clinic) 207 E. 12th Street Emmitt, ID 83617 208-365-1065</td>
<td></td>
</tr>
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</table>
### Internal Medicine Clinical Clerkship

The third year internal medicine curriculum requires a three week ambulatory care rotation in internal medicine for all students. Since 2007, the contract requires this rotation to be done in Idaho. These rotations are scheduled for the second half of the third year so that students going have had at least six months of patient contact.

### Internal Medicine Volunteer Clinical Faculty in Idaho 9-13

<table>
<thead>
<tr>
<th>Physician</th>
<th>Address</th>
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<tbody>
<tr>
<td>Nancy Alston</td>
<td>Idaho State University, Student Health Center</td>
<td>(208) 282-2330</td>
</tr>
<tr>
<td></td>
<td>921 South 8th Ave, MSC 8311</td>
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</tr>
<tr>
<td></td>
<td>Pocatello, ID 83209</td>
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</tr>
<tr>
<td>Alan Avondet</td>
<td>2001 S. Woodruff Avenue</td>
<td>(208) 522-7310</td>
</tr>
<tr>
<td></td>
<td>Suite 15</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Idaho Falls, ID 83404</td>
<td></td>
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<tr>
<td>Brian Berk</td>
<td>St Lukes Clinic, Twin Falls, ID</td>
<td>(208) 814-8300</td>
</tr>
<tr>
<td>Sky Blue</td>
<td>125 South Idaho Suite 203</td>
<td>(208) 338-0148</td>
</tr>
<tr>
<td></td>
<td>Boise, ID 83712</td>
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<tr>
<td>Sherwin D'Souza</td>
<td>Diabetes &amp; Internal Medicine Associates</td>
<td>(208) 235-5910</td>
</tr>
<tr>
<td></td>
<td>2302 E Terry Street Ste. A</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pocatello, ID 83204</td>
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The Public/Community Project

Course Objectives: This four-week Public/Community Project is designed to acquaint medical students with the skills, knowledge, and attitudes basic to the Public Health/Community Health Model for addressing a community health problem or issue.

Activities: The project is chosen by the student and must focus on a public health issue/problem present in the community setting. Students partner with a public or private agency that focuses on the topic chosen. Students are expected to use national, state and local public health resources, computer searches, and readings in completing their project.

Project Types: Students choose one or two of the following components of a community project.
1. Health Need Assessment (includes: define the community, characterize the community’s health, and prioritize the health concerns.
2. Propose/Implement Targeted Interventions: Implementation of an action, activity, training, or educational program that is meant to alleviate a defined public health problem or issue. This should be measurable and address a specific group.
3. Evaluate Implementation/Outcomes: Review of an ongoing project to determine its effectiveness and make recommendations for changes in future actions.

Three Questions to Ask before a Project Topic is Chosen: The student must answer three of these questions to receive approval from the Family Medicine Student Programs Director.
1. What is important to the community/population group you are going to work with? (This may include public health personnel, agencies, and the community-at-large.)
2. What issues have the greatest impact on the health of the specific identified group (in whose opinion)?
3. What issue can be reasonably addressed (studied) over four weeks?
4. Will the proposed project receive the appropriate amount of effort?

Project Guidelines:
1. The project should provide a benefit or service to a community or population group.
2. A project topic that is closely related to a health care area that involves local/community public health systems. Avoid topics that are narrow in scope and have limited occurrence and effect on the community. Topics that lend themselves to intervention and prevention methods are preferred.
3. Avoid politically sensitive topics (examples: birth control in teenagers) and projects that deal with children 18 years and under.

Other Clinical Medical Education Opportunities in Idaho

Family Medicine (Primary Care) Preceptorship

Course Objectives: The six-week Primary Care Preceptorship is designed to acquaint all medical students with the skills, knowledge, and attitudes basic to a successful practice in primary care. Rotations will be completed in a medically underserved rural or urban primary care site. Most rotations sites are in remote rural locations where the student lives in the community for the six weeks. The site provides for family practice, internal medicine, pediatric care, obstetrics/gynecology or other requested specialty sites deemed appropriate by the Utah Area Education Center program.

Course Requirements: Students will:
1. Demonstrate knowledge of 20 clinical problems encountered in the primary care site they are working with including a basic history, physical examination, laboratory investigation and treatment pertinent to each.
2. Identify 10 urgent or emergent conditions likely to be encountered by physicians in this site and describe the basic history, physical examination, laboratory investigation and treatment pertinent to each.

3. Describe the clinical health promotion/disease prevention services appropriate to the site, and the reach for each.

4. List the five most common public health problems of the community in which the site is located.

5. Discuss the roles of primary care providers, consultants, community agencies, hospitals, and governments in promoting public health and managing illness in the community.

6. Formulate a question/topic about a community health issue, review relevant medical literature, collect data from the practice relevant to the question, and write a report on the findings. A verbal report is to be made by each student as part of the debriefing at the end of the rotation.

**Activities:** Students divide their time at the practice site between two areas:

1. The first area, covering 60% of the preceptorship time will be spent in clinical activities with the preceptors.

2. The second area, 40% of the time will be spent completing a “Public Health” Community Health Project. The project is to be chosen by the student and will have a focus on the public health issue/problem present in the community where they are working. Students will use the preceptors’ practices, local public health resources, computer searches, texts, and readings in completing their project.

**Preceptor/Site Requirements:** Preceptors will be board certified physicians, who hold Volunteer Clinical Faculty appointments with the University of Utah School of Medicine. Students will choose a specialty focus and an AHEC area for this rotation. The AHEC Center or Student Programs will match the student with a preceptor and provide assistance with course logistics (travel, housing, etc.)
Financial Report 2012-2013

The Idaho State Board of Education subsidizes eight seats at the University of Utah so these students are able to pay in-state tuition. For academic year 2012-2013, Idaho students paid $30,458.78, with student fees of $943.80, for a total of $31402.58. Idaho students also paid a surcharge of $1,652, which was returned to Idaho*. The State of Idaho paid $39,284/per student.

*This went towards the Idaho Rural Recruitment program

A portion of the subsidy that the University of Utah receives from the ISBOE went towards:

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| Boise Physician Support Salary                | $12,772.00|
| Administrative Support Salary                | $ 45,140.18|
| **Total**                                     | **$ 72,965.94**|

The remainder of the funds was used for educational advancement of Idaho Medical Students.

* Covered expenses for rotations:
  **First-Year Job Shadowing Stipend:** $1100/4 week block
  **Mileage:** One round trip between SLC and rotation site ($0.565./mile) and mileage if distance between housing and rotation sites is ≥ 15 miles ($0.565/mile)
  **Housing:** If renting apt/motel ≤ $600 or if staying with family or friends a nice dinner/gift basket as a thank you ≤ $75
  **Preceptor:** nice dinner/gift basket as a thank you ≤ $75

(Physicians that mentor students in Idaho do so as volunteers. We have been impressed with the willingness of physicians to volunteer to teach medical students and have appreciated the time and effort that it takes for these physicians to give students an opportunity for an Idaho experience. These physicians are required to be credentialed as volunteer faculty at the University of Utah in order to teach in the 3rd year clerkship rotations.)
School of Medicine Graduate Report

Following is the medical student graduate report of Idaho sponsored and non-sponsored from the Office of Student Affairs:

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<td>4</td>
</tr>
<tr>
<td>2002-2003</td>
<td>9</td>
<td>1</td>
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<td>2001-2002</td>
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<tr>
<td>2000-2001</td>
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<tr>
<td>1999-2000</td>
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<td>1998-1999</td>
<td>6</td>
<td>2</td>
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<td>1997-1998</td>
<td>6</td>
<td>1</td>
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<tr>
<td>1996-1997</td>
<td>6</td>
<td>3</td>
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<tr>
<td>1995-1996</td>
<td>6</td>
<td>3</td>
</tr>
</tbody>
</table>

As of September 2013, the Alumni Office reported the following estimated numbers for graduates practicing medicine in Idaho:

Estimated Idaho Sponsored Students, 1953-2012: 259
Medical School Graduates practicing in Idaho: 246
Resident Graduates practicing in Idaho: 132
Total: 378
Following is the resident graduate report of those who choose Idaho to practice medicine from the Office of Graduate Medical Education:

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Number of Graduates</th>
<th>Specialty</th>
</tr>
</thead>
</table>
| **2012 - 2013** | 8 : 305             | 1 – Pediatrics
|               |                     | 2 – Cardiology
|               |                     | 1 – Pathology
|               |                     | 1 – Internal Medicine
| **2011 - 2012** | 8 : 297             | 1 – Neurology
|               |                     | 1 – Family Medicine
|               |                     | 1 - Pediatrics
| **2010 – 2011** | 9 : 292             | 4 – Family Medicine
|               |                     | 1 – Radiation Oncology
|               |                     | 1 – Internal Medicine
| **2009 – 2010*** | 7 : 266             | 1 – Medicine – Psychiatry
| Jason Hawkes, MD | Grad 2011           | 3 – Family Medicine
|               |                     | 3 – Internal Medicine
| **2008 – 2009*** | 7 : 287             | 1 – Anesthesiology
| Robin Ninefeldt, MD | Grad 2010         | 3 – Internal Medicine
|               |                     | 1 – Family Medicine
| **2007 – 2008*** | 7 : 265             | 4 – Family Medicine
| Matt Reed, MD, PhD | Grad 2010         | 1 – Internal Medicine
|               |                     | 2 - Anesthesiology
| **2006-2007**  | 4 : 228             | 1 – Internal Medicine
|               |                     | 2 – Pediatrics
|               |                     | 1 – Pediatric Hemy/Onc
| **2005-2006**  | 8 : 214             | 2 – Sports Medicine
|               |                     | 1 – Dental
|               |                     | 2 – Pediatrics

*ATTACHMENT 2 BAHR - SECTION II TAB 1 Page 30*
<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Number of Graduates</th>
<th>Specialty</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>1 – Pulmonary</td>
</tr>
<tr>
<td>2004-2005</td>
<td>7: 222</td>
<td>1 – Internal Medicine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 – Anesthesiology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2 – Dental</td>
</tr>
</tbody>
</table>
SUBJECT
Board Policy V.R. – Establishment of Fees – first reading

REFERENCE
September 1994  Board approved separate technology fee
February 2011  Board removed matriculation fees for University of Idaho
October 2012  Board directed staff to add a dependent fee waiver to Board policy
February 2013  Board approved various revisions to policy V.R.

APPLICABLE STATUTE, RULE, OR POLICY
Idaho State Board of Education Governing Policies & Procedures, Section V.R.

BACKGROUND/DISCUSSION
At the February 2013 Board meeting, the Board approved the second reading of changes to Board policy V.R. to, among other things, allow institutions to determine employee/spouse and dependent fees (subject to Board approval). The institutions have suggested the Senior Citizen fee should be treated similarly.

IMPACT
The current Senior Citizen fee is for Idaho residents 60 years and older and includes a $20.00 registration fee plus $5.00 per credit hour. This revision will allow each institution to determine eligibility and set the fee, subject to Board approval.

ATTACHMENTS
Attachment 1 – Section V.R. – First Reading  Page 3

STAFF COMMENTS AND RECOMMENDATIONS
The proposed revisions change the Senior Citizen fee from a set dollar amount to mirror language used for the employee spouse and dependent fees.

Staff recommends approval.

BOARD ACTION
I move to approve the first reading of proposed amendments to Board policy Section V.R., Establishment of Fees, with all revisions as presented.

Moved by____________ Seconded by____________ Carried Yes____ No____
vi. Employee/Spouse/Dependent Fee

The fee for eligible participants shall be set by each institution, subject to Board approval. Eligibility shall be determined by each institution. Employees, spouses and dependents at institutions and agencies under the jurisdiction of the Board may be eligible for this fee. Employees of the Office of the State Board of Education and the Division of Professional-Technical Education shall be treated as institution employees for purposes of eligibility. Special course fees may also be charged.

vii. Senior Citizen Fee

The fee for Idaho residents who are 60 years of age or older shall be a registration fee of twenty dollars ($20.00) plus five dollars ($5.00) per credit hour. This fee is for courses on a space available basis only. Special course fees may also be charged.

viii. In-Service Teacher Education Fee

The fee shall not exceed one-third of the average part-time undergraduate credit hour fee or one-third of the average graduate credit hour fee. This special fee shall be applicable only to approved teacher education courses. The following guidelines will determine if a course or individual qualifies for this special fee.

a) The student must be an Idaho certified teacher or other professional employed at an Idaho elementary or secondary school.

b) The costs of instruction are paid by an entity other than an institution.

c) The course must be approved by the appropriate academic unit(s) at the institution.

d) The credit awarded is for professional development and cannot be applied towards a degree program.

ix. Workforce Training Credit Fee

This fee is defined as a fee charged students enrolled in a qualified Workforce Training course where the student elects to receive credit. The fee is charged for processing and transcripting the credit. The cost of delivering Workforce Training courses, which typically are for noncredit, is an additional fee since Workforce Training courses are self-supporting. The fees for delivering the courses are retained by the technical colleges. The Workforce Training fee
shall be $10.00 per credit.

b. Institutional Local Fees – Approved by the Board

Institutional local fees are both full-time and part-time student fees that are approved by the State Board of Education and deposited into local institutional accounts. Local fees shall be expended for the purposes for which they were collected.

The facilities, activity and technology fees shall be displayed with the institution’s tuition and fees when the Board approves tuition and fees.

i. Facilities Fee

Facilities fee is defined as the fee charged for capital improvement and building projects and for debt service required by these projects. Revenues collected from this fee may not be expended on the operating costs of the general education facilities.

ii. Activity Fee

Activity fee is defined as the fee charged for such activities as intercollegiate athletics, student health center, student union operations, the associated student body, financial aid, intramural and recreation, and other activities which directly benefit and involve students. The activity fee shall not be charged for educational costs or major capital improvement or building projects. Each institution shall develop a detailed definition and allocation proposal for each activity for internal management purposes.

iii. Technology Fee

Technology fee is defined as the fee charged for campus technology enhancements and operations.

iv. Professional Fees

To designate a professional fee for a Board approved academic program, all of the following criteria must be met:

a) Credential or Licensure Requirement:

1) A professional fee may be assessed for an academic professional program if graduates of the program obtain a specialized higher education degree that qualifies them to practice a professional service involving expert and specialized knowledge for which credentialing or licensing is required. For purposes of this fee, “academic” means a
systematic, usually sequential, grouping of courses that provide the student with the knowledge and competencies required for a baccalaureate, master’s, specialist or doctoral degree as defined in policy III.E.1.

2) The program leads to a degree where the degree is at least the minimum required for entry to the practice of a profession.

b) Accreditation Requirement: The program:
   1) is accredited,
   2) is actively seeking accreditation if a new program, or
   3) will be actively seeking accreditation after the first full year of existence if a new program by a regional or specialized accrediting agency.

c) Extraordinary Program Costs: Institutions will propose professional fees for Board approval based on the costs to deliver the program. An institution must provide clear and convincing documentation that the cost of the professional program significantly exceeds the cost to deliver non-professional programs at the institution. A reduction in appropriated funding in support of an existing program is not a sufficient basis alone upon which to make a claim of extraordinary program costs.

d) The program may include support from appropriated funds.

e) The program is consistent with traditional academic offerings of the institution serving a population that accesses the same activities, services, and features as regular full-time, tuition-paying students.

f) Upon the approval and establishment of a professional fee, course fees associated with the same program shall be prohibited.

g) Once a professional fee is initially approved by the Board, any subsequent increase in a professional fee shall require prior approval by the Board at the same meeting institutions submit proposals for tuition and fees.

v. Self-Support Academic Program Fees

a) Self-support programs are academic degrees or certificates for which students are charged program fees, in lieu of tuition. For purposes of this fee, “academic” means a systematic, usually sequential, grouping of courses that provide the student with the knowledge and competencies required for an academic certificate, baccalaureate, master’s, specialist or doctoral degree. To bring a Self-support program fee to the Board for approval, the following criteria must be met:

1) An institution shall follow the program approval guidelines set forth in policy III.G.
2) The Self-support program shall be a defined set of specific courses
that once successfully completed result in the awarding of an academic certificate or degree.

3) The Self-support program shall be distinct from the traditional offerings of the institution by serving a population that does not access the same activities, services and features as full-time, tuition paying students, such as programs designed specifically for working professionals, programs offered off-campus, or programs delivered completely online.

4) No appropriated funds may be used in support of Self-support programs. Self-support program fee revenue shall cover all direct costs of the program. In addition, Self-support program fee revenue shall cover all indirect costs of the program within two years of program start-up.

5) Self-support program fees shall be segregated, tracked and accounted for separately from all other programs of the institution.

b) If a Self-support program fee is requested for a new program, an institution may fund program start-up costs with appropriated or local funds, but all such funding shall be repaid to the institution from program revenue within a period not to exceed three years from program start-up.

c) Once a Self-support program fee is initially approved by the Board, any subsequent increase in a Self-support program fee shall require prior approval by the Board.

d) Institutions shall audit Self-support academic programs every three (3) years to ensure that program revenue is paying for all program costs, direct and indirect, and that no appropriated funds are supporting the program.

e) Students enrolled in self-support programs may take courses outside of the program so long as they pay the required tuition and fees for those courses.

vi. Contracts and Grants

Special fee arrangements are authorized by the Board for instructional programs provided by an institution pursuant to a grant or contract approved by the Board.

vii. Student Health Insurance Premiums or Room and Board Rates

Fees for student health insurance premiums paid either as part of the uniform student fee or separately by individual students, or charges for room and board at the dormitories or family housing units of the institutions. Changes in insurance premiums or room and board rates or family housing charges shall be approved by the Board no later than three (3) months prior to the semester the change is to become effective. The Board may delegate the approval of these premiums and rates to the chief executive officer.
viii. New Student Orientation Fee

This fee is defined as a mandatory fee charged to all first-time, full-time students who are registered and enrolled at an institution. The fee may only be used for costs of on-campus orientation programs such as materials, housing, food and student leader stipends, not otherwise covered in Board-approved tuition and fees.

c. Institutional Local Fees and Charges Approved by Chief Executive Officer

These local fees and charges are assessed to support specific activities and are only charged to students that engage in these particular activities. Local fees and charges are deposited into local institutional accounts or unrestricted current fund 0650 and shall only be expended for the purposes for which they were collected.

i. Continuing Education

Continuing education fee is defined as the additional fee to part-time students which is charged on a per credit hour basis to support the costs of continuing education.

ii. Course Overload Fee

This fee may be charged to full-time students with excessive course loads as determined by each institution. Revenue from this fee is deposited in unrestricted current fund 0650.

iii. Special Course Fees or Assessments

A special course fee is a fee required for a specific course or special activity and, therefore, not required of all students enrolled at the institution. Fees such as: student orientation fees (when assessed to only those who register to participate), penalty assessments, library fines, continuing education fees, parking fines, laboratory fees, breakage fees, fees for video outreach courses, late registration fees, and fees for special courses offered for such purposes as remedial education credit that do not count toward meeting degree requirements are considered special course fees. All special course fees or penalty assessments, or changes to such fees or assessments, are established and become effective in the amount and at the time specified by the chief executive officer or provost of the institution. The chief executive officer is responsible for reporting these fees to the Board upon request.
SUBJECT
Board policy V.U. – Entertainment and Related Expenses

APPLICABLE STATUTES, RULE OR POLICY
Idaho State Board of Education Governing Policies & Procedures, Section V.U.
Idaho Board of Examiners State Travel Policy and Procedures

BACKGROUND / DISCUSSION
Staff received a question from an institution seeking clarification and interpretation of allowable entertainment expenses per Board policy V.U. Upon review of the policy, staff determined the policy is problematically vague and in need of updating. Staff reviewed entertainment policies at other public higher education systems as a guide. The policy is clarified by adding two categories of allowable entertainment expenses:
1) Entertainment involving guests external to the institution and directly related to five general purposes; and
2) Meals for institution administrative/business meetings.

The proposed changes also clarify a provision to allow for payment of business and civic club memberships.

IMPACT
Approving the amendments to Board policy V.U. will provide more clarification and controls for entertainment expenses.

ATTACHMENTS
Attachment 1 – Board policy V.U. – First reading

STAFF COMMENTS AND RECOMMENDATIONS
Examples of a business or civic club membership would be a local chamber of commerce or Rotary Club. Staff suggests that membership in clubs outside of these categories, such as a dining or country club (e.g. the Arid Club), should be limited to senior management and included in their contracts, subject to Board approval.

Staff recommends approval.

BOARD ACTION
I move to approve the first reading of proposed amendments to Board policy V.U. Entertainment and Related Expenses, with all revisions as presented.

Moved by____________ Seconded by____________ Carried Yes ____ No____
1. The chief executive officer and his or her designated employees are authorized to use foundation and local funds for entertainment and related expenses for official functions which support the institutional mission and serve a business purpose.
   a. Entertainment involves guests external to the institution and is related to one or more of the following purposes:
      i. recognition or promotion of academic achievement, scholarship, service to the institution, or athletic achievement
      ii. promotion or communication of intellectual ideas and/or exchange of administrative and operational information on the institution’s programs or activities
      iii. support of institution-sponsored student events and activities
      iv. development events (donor receptions, fundraising activities, etc.)
      v. assistance to the State Board of Education, accrediting agencies, officials from other institutions, etc.
   b. Meals may be provided for institution administrative/business meetings if integral to the meeting and the meeting time encompasses a normal meal time. Meetings at which a meal is provided must include at least one institution employee, be agenda driven, and be directly related to specific institution business.
2. Public relations expenses, such as flowers and plaques, social and business and civic club memberships (e.g., chamber of commerce or Rotary Club), and charitable donations and contributions, and other out-of-pocket expenses are reimbursable if they are reasonable, necessary, and related to the function of the institution as determined by the chief executive officer.
3. All These expenses authorized in this Subsection shall be properly documented to support the business purpose of the expenditure. In addition, actual expenses shall be reported to the Board upon request.
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SUBJECT
Board Policy V.F. – Bonds and Other Indebtedness – second reading

REFERENCE
April 2013  Board returned first reading of V.F. to Business Affairs & Human Resources (BAHR) Committee
October 2013  Board approved first reading of V.F.

APPLICABLE STATUTES, RULE OR POLICY
Idaho Code §33-3801 et seq.
Idaho State Board of Education Governing Policies & Procedures, Section V.F.

BACKGROUND / DISCUSSION
The current policy on Bonds and Other Indebtedness is very limited in scope and contains several outdated or duplicative provisions. In addition, the policy is silent with respect to any form of comprehensive guidelines for structuring and issuance of debt for the financing of capital expenditures, managing the debt portfolio, etc. “Adherence to a debt management policy signals to rating agencies and the capital markets that an [entity] is well managed and therefore is likely to meet its debt obligations in a timely manner.”

IMPACT
Approving the proposed amendments to Board policy V.F. would formalize a Board debt policy.

ATTACHMENTS
Attachment 1 – Board Policy V.F. – second reading  Page 5

STAFF COMMENTS AND RECOMMENDATIONS
The following material changes were made between first and second reading:

1) The first reading deleted current paragraph 5 (“Expenditure of Excess Revenue”) in its entirety. The original intent was to address this issue elsewhere in the policy, but it was discovered that hadn’t happened. As a result, staff recommends restoring the second sentence (“Expenditure of excess revenue for other projects requires prior Board approval.”) and including some additional narrative to contextualize the provision, all as a new paragraph 3.

2) The last sentence of 4.b.i. is deleted because in consultation with institutions, Board staff determined it was unclear and unnecessary.

3) Paragraph 4.b.iii. was changed to read debt issuances “should” (instead of “will”) be consolidated.

---

4) Paragraph 4.b.v. was changed at the request of the Board to clarify that fixed rate financing is the “preferred” rather than “typical” financing instrument of choice.

5) Paragraph 4.b.v.b) was changed by staff to read that an institution’s amount of variable rate debt outstanding “shall” (instead of “should”) not exceed twenty percent (20%) of an institution’s total debt portfolio without prior Board approval. Since Board approval is required, exceeding the ratio should not otherwise be permissive.

Staff recommends approval.

BOARD ACTION

I move to approve the second reading of proposed amendments to Board Policy V.F., Bonds and Other Indebtedness, with all revisions as presented.

Moved by____________ Seconded by____________ Carried Yes____ No____
1. General Powers

The University of Idaho, Idaho State University, Lewis-Clark State College, and Boise State University may incur debt, with or without the issuance of bonds, to be used for a “project” (as that term is defined in section 33-3802, Idaho Code). The Board shall act by formal resolution and by a majority roll call vote of all the members of the Board to approve the terms of any debt financing transaction. Such indebtedness is not an obligation of the state of Idaho but is an obligation solely of the respective institution and the institution’s respective board of trustees. For indebtedness of a major capital project, an institution shall first obtain approval in accordance with Board policy V.K. (for purposes of this subsection, a major capital project is one in which the project cost exceeds $1,000,000). Student fees, rentals, charges for the use of the projected facility, or other revenue may be pledged or otherwise encumbered to pay the indebtedness. Refunding bonds also may be issued.

Eastern Idaho Technical College is not authorized to borrow money under Chapter 38, Title 33, Idaho Code.

2. Responsibility of the Chief Executive Officer

The chief executive officer of the institution is responsible for compliance with state law and these provisions when any indebtedness is incurred.

3. Expenditure of Excess Revenue

Bonds are issued to fund projects based on estimated costs. Projects rarely cost the exact amount anticipated and interest is earned on unspent bond proceeds, all of which may result in remaining unspent funds. When a project is completed, these unspent funds may be expended on other projects with the same tax status as the original issuance; provided however, that expenditure of excess revenue—said unspent funds for other projects requires prior Board approval.

34. Debt Policy

Debt financing allows an institution to pay for a project over a period of time, not to exceed the project’s useful life, rather than pay for it entirely at the time of purchase. This is a financially responsible practice for certain types of capital projects within appropriate limitations and acceptable interest rates. Examples of debt financing include bonds, loans or capital leases. Debt capacity is a valuable tool for an institution and must be managed thoughtfully using a strategy which incorporates current and future financing needs.

a. Objectives
i. To provide a guideline on the individual and collective total use of debt financing to support the capital needs of an institution governed by the Board while balancing institutional objectives with achieving the lowest overall cost of capital relative to current credit market terms and structure risk.

ii. To provide a financial ratio with a specific target to ensure appropriate financial parameters that enable an institution to maintain access to capital markets through an acceptable credit rating as determined by a rating agency (Moody's, Standard & Poor’s, or Fitch’s Investors Service).

b. Principles for Structuring Debt Financing

i. An institution will consider its debt portfolio holistically so as to optimize the debt portfolio for the entire institution, rather than only on a project-by-project basis, while taking into account an institution’s cash and investments. An institution will manage the timing and overall level of debt to provide low-cost and timely access to the capital markets. An institution will balance the goal of achieving the lowest cost of capital with the goal of limiting exposure to interest rate risk, other financing and credit risks and on-going requirements. For preservation of the debt capacity and the security for debt financing, debt may be used for projects with the available and permissible revenue obligation pledge of an institution as security.

ii. A project can be considered for debt financing if there is an identifiable repayment source and, where required, an additional reserve fund or income from unrestricted resources to be used should intended repayment sources become unavailable.

iii. Debt issuances will be coordinated and consolidated by each institution to the extent it is advantageous so that multiple projects can be accommodated in a single borrowing to reduce overall issuance cost per dollar of debt issued.

iv. Internal resource loans from unrestricted funds may be used for interim financing until long-term financing can be completed in compliance with IRS regulations.

v. Institutions may issue fixed or variable rate debt financing instruments. Fixed rate debt provides more long-term interest rate stability than variable rate debt, and therefore will be the preferred financing instrument of choice. However, variable rate debt may be appropriate where it can provide repayment/restructuring flexibility; benefit from historically lower average interest costs; diversify the debt portfolio; and/or provide a hedge to short-term investment balances.
a) An institution shall evaluate the following three (3) key risk categories associated with a debt offering to finance capital projects when considering the choice between variable or fixed rate debt structures.

i) Rate Risk: the risk that short-term interest rates will increase beyond an institution’s debt service provisions, thereby, taking resources away from the other competing programs or uses. Cost-effective interest rate hedge instruments should be considered to mitigate variable rate debt exposure.

ii) Tax Risk: the risk that federal tax changes could raise the cost of variable rate debt.

iii) Liquidity or Funding Risk: the possibility that buyers in the market would not be willing to buy the bonds sold by current investors during the regular remarketing schedule, causing either an institution or its letter of credit bank to need to purchase those bonds when presented for sale on the market. In addition, an institution considering variable rate debt will give consideration to renewal and repricing factors associated with any supporting letter of credit.

b) In order to limit exposure to interest rate risk, an institution’s amount of variable rate debt outstanding should not exceed twenty percent (20%) of an institution’s total debt portfolio without prior Board approval.

vi. Institutions will actively consider current or advanced refunding opportunities of outstanding debt when:

a) the net present value savings are positive, or

b) the refunding will support a strategic need of an institution by providing an opportunity to change debt amortization, or eliminate unwanted covenants or tax regulation.

c. Debt Capacity Review

In an effort to meet the objectives of this policy, the Board has established a limit for overall debt using a debt burden ratio which measures an institution's dependence on debt as a fund source for financing its operations and the relative cost of debt to an institution’s total expenditures. By maintaining an appropriate proportion of debt service to expenditures, other critical and strategic needs can be met as part of the expense base. The limit for this ratio is to be no greater than 8.0%. The ratio is expressed in the following equation:

\[
\frac{\text{Actual Debt Service}}{\text{Annual Adjusted Expenses}} \leq 8\%
\]
i. The numerator of this ratio includes: institution interest expense plus institution principal payments

ii. The denominator of this ratio includes: institution total operating expenses plus institution total nonoperating expenses minus institution depreciation expense plus institution principal payments

d. Investor Disclosure and Continuing Disclosure Obligations
Each institution has an obligation under federal law to provide relevant and timely disclosure to bond investors of material events and other institutional information via the Municipal Securities Rulemaking Board’s Electronic Municipal Market Access (EMMA) system.

e. Taxable Debt
Taxable debt is appropriate in instances where projects do not qualify for tax-exempt financing. Certain situations exist whereby the planned future use of the project may materially change to permit more federally funded research-based and/or commercial-related activities that potentially violate current tax-exempt financing laws, or when the taxable rate premium is offset by other cost savings. An institution shall perform an analysis to support determination that taxable debt is warranted.

f. Short-term or Interim Debt
An institution may enter into short-term borrowing agreements to provide interim financing for projects or portions of projects for which an institution ultimately intends to issue long-term debt. Short-term borrowing is subject to the same approvals, limits and ratio calculations as long-term debt.

h. Requesting Approval to Issue Debt
i. In addition to the preliminary official statement and bond resolution documents, an institution shall provide to the Board supporting documents including, but not limited to, rating agency rating report(s), debt service to budget graph, and a ten (10) year debt projection including all revenue assumptions.

ii. The debt burden ratio shall be calculated to show the effect of a new debt issue.

l. Post-Issuance Monitoring Report
Two years following a project purchase or completion for which debt was issued in whole or in part, the institution shall present, as an information item at a regularly scheduled meeting of the Board, a report on debt service revenue assumptions including, but not limited to, capital campaigns, gate or program revenue, and student tuition and fee revenue.
j. Financial Reporting
   The executive director may adopt certain reporting requirements in the area of
   issuance of debt by institutions, and such reports shall be provided at a date
   specified and contain information as prescribed by the executive director.
BOISE STATE UNIVERSITY

SUBJECT
Construction of Sports/Recreation Green Field

REFERENCE
June 2012 Board approved six-year Capital Improvement Plan Amendment
June 2013 Board approved design of Sports/Recreation Green Field

APPLICABLE STATUTE, RULE, OR POLICY
Idaho State Board of Education Governing Policies & Procedures, Section V.K.4.

BACKGROUND/DISCUSSION
In June 2013, the Idaho State Board of Education authorized Boise State University (BSU) to proceed with the planning and design of a new sports/recreation green field to be located at the east end of campus. The design-build method was approved for this project and McAlvain Design-Build, Inc. was selected using the standard Request for Quote (RFQ) process through the Division of Public Works.

This project will abate and demolish the Applied Technology and Mechanical Technology buildings to construct a natural grass field for Athletics and student intramural sports. An entry structure, landscaping, and a perimeter fence are also part of the project. In addition, a hazardous materials storage modular will be relocated and McAlvain will prepare a site for the University to construct sand volleyball courts.

McAlvain has completed the preliminary design and cost estimates for this project and the University requests approval to begin construction. Anticipated construction completion is August of 2014.

IMPACT
Design-build costs including design, abatement, demolition and construction fees are estimated at $1,455,000. Total project costs including contingency, equipment costs, testing, geotechnical, surveying and reports are estimated at $1,762,000, contingent on final contractor pricing.

The funding source for this project is institutional reserves.
AA

ATTACHMENTS
Attachment 1 – Project Budget Page 3
Attachment 2 – Capital Project Tracking Sheet Page 4

STAFF COMMENTS AND RECOMMENDATIONS
BSU’s unrestricted (designated) net assets for capital projects were $9.8M as of June 30, 2013. Included in that number is $2.1M set aside for the Green Field project.

Staff recommends approval.

BOARD ACTION
I move to approve the request by Boise State University to proceed with construction of the Sports/Recreation Green Field for a total cost not to exceed $1,762,000.

Moved by __________ Seconded by __________ Carried Yes _____ No ______
<table>
<thead>
<tr>
<th>Category</th>
<th>Budget</th>
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<tbody>
<tr>
<td>Architectural Fees (included in design build costs below)</td>
<td>$ -</td>
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<tr>
<td>Design Build Costs</td>
<td>$ 1,455,000.00</td>
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<tr>
<td>Testing, Inpections and Misc.</td>
<td>$ 28,400.00</td>
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<tr>
<td>Construction Contingency</td>
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<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$ 1,513,400.00</strong></td>
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<tr>
<td>University Costs</td>
<td>$ 113,883.71</td>
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<tr>
<td>Project Contingency (10%)</td>
<td>$ 134,716.29</td>
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<tr>
<td><strong>Total Project</strong></td>
<td><strong>$ 1,762,000.00</strong></td>
</tr>
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</table>
### History Narrative

1. **Institution/Agency:** Boise State University  
2. **Project:** Sports/Recreation Green Field
3. **Project Description:** Construction for new Sports/Recreation Green Field
4. **Project Use:** Athetics and Recreational Use
5. **Project Size:** Approx. 5 Acres

### Sources of Funds

<table>
<thead>
<tr>
<th>Sources of Funds</th>
<th>Use of Funds</th>
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<tbody>
<tr>
<td>PBF</td>
<td>ISBA</td>
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<tr>
<td>Initial Cost of Project Construction</td>
<td>$ -</td>
</tr>
</tbody>
</table>

### Total Project Costs

| Total Project Costs | $ - | $ - | $ 1,762,000 | $ 1,762,000 | $ 150,200 | $ 1,304,800 | $ 307,000 | $ 1,762,000 |

### History of Funding

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UNIVERSITY OF IDAHO (UI)

SUBJECT
Capital Project Planning and Design Authorization Request, Replace Aquaculture Research Institute facility, Moscow Campus

APPLICABLE STATUTE, RULE, OR POLICY
Idaho State Board of Education Governing Policies & Procedures, Sections V.K.1 and V.K.3.a.

BACKGROUND/ DISCUSSION
The Aquaculture Research Institute (ARI) has research facilities both on the Moscow campus and in Southern Idaho at the Hagerman Fish Culture Experiment Station. Facilities at both locations include fish rearing laboratories, analytical laboratories, offices, and meeting rooms. The ARI supports aquaculture/fisheries-related research and teaching in a variety of disciplines. Research at the ARI is aimed at improving production for commercial aquaculture, and restoring important native fish populations such as the endangered Redfish Lake sockeye or Idaho’s remnant Burbot (freshwater cod) population.

Campus ARI facilities support fish holding and experimentation, but they also provide space for faculty and staff offices, graduate student offices, conference areas, and dry lab space. These research facilities are designed to meet many research and teaching needs for faculty involved in the fisheries/aquaculture field. Fish and tank space is provided as a service to faculty from many different departments at UI and Washington State University (WSU). Fish are reared at ARI facilities for use in teaching laboratories in various courses offered through the Department of Fish and Wildlife Sciences. One of the primary research programs currently underway on-campus involves a conservation aquaculture program that is a partnership between the university and the Kootenai Tribe in North Idaho. Novel captive rearing methods assist in the recovery of a native species of Burbot. This work has supported species re-introduction efforts and involves national and international agency collaborators.

The current building on Poultry Hill was originally a residential farmhouse built in the 1920s, in which the University has housed aquaculture research for the last 25 years or more. The building has many deficiencies and is in need of repairs and modernization to bring it up to current code. Repair needs include a new roof, building siding, windows, a new boiler, water and sewer service upgrades, replacement of the electrical system, and various ADA improvements. All told, the estimated repair costs far exceed the replacement value of the facility.

This is a request for Regents’ authorization to implement the planning and design phase for the demolition and replacement of the existing aquaculture research
facility located on Poultry Hill on the main campus of the University of Idaho, Moscow, Idaho. The capital project budget is estimated at $1.3 million. If authorized, the University will proceed through the design phase, and then seek further Regents’ authorization of the project budget, and subsequent construction. Approval of an updated six-year capital plan is also necessary to reflect the near term implementation of this project.

A new 7,000 – 7,500 square foot facility will provide improved capabilities and be located close to the larger cold water wet lab on the west end of campus near the Holm Research Center. Improving the ARI campus facilities will ensure longevity of important ongoing research programs and will facilitate new opportunities for current and future fisheries faculty at UI. Relocating near the larger fish facility will increase critical mass and interaction between staff and faculty, and provide new capacity for funded research projects.

IMPACT
The immediate fiscal impact of this effort is $120,000 to fund planning and design phase costs of the overall project. The overall project effort is anticipated to be $1,300,000. Design costs are to be funded initially from internal strategic reserves, with the University repaying itself through bond debt at a later date.

**Planning and Design Phase**

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ATTACHMENTS
Attachment 1 – Amended Six-Year Capital Plan Page 5
Attachment 2 – Reimbursement Resolution Page 7
Attachment 3 – Capital Project Tracking Page 9

STAFF COMMENTS AND RECOMMENDATIONS
Board policy V.K. provides that “Before any institution or agency under the governance of the Board solicits, accepts or commits a gift or grant in support of a specific major project, such project must first be included on the institution’s or agency’s Board-approved six-year [capital construction] Plan. If a major project is not included in a Plan and an institution or agency under the governance of the Board desires to obtain approval of the major project, before seeking approval, it shall first bring an amended plan to the Board for approval at a regularly scheduled meeting of the Board.”

The proposed Aquaculture Research facility project was not on the UI’s six-year Plan approved by the Board in August 2013, so UI is seeking approval to add the project to the Plan, for approval to proceed with project design and to use future
bond proceeds (subject to subsequent Board approval) to reimburse institutional funds used for design expenses. As of FY 2013 year-end, UI’s debt burden ratio was 3.8% (the quotient derived by dividing debt service by annual adjusted expenses). The Board’s pending debt policy sets a debt burden cap at 8%.

Staff recommends approval.

BOARD ACTION

I move to approve the University of Idaho’s updated six-year capital plan to include the proposed aquaculture research facility.

Moved by __________ Seconded by __________ Carried Yes _____ No _____

AND

I move to approve the request by the University of Idaho to implement the planning and design phases of a Capital Project for the replacement of the Poultry Hill Aquaculture Research facility, in the amount of up to $120,000, and to repay UI funds expended in this phase through bond proceeds at a later date. Authorization includes the authority to execute all necessary and requisite consulting contracts to fully implement the planning and design phases of the project. Bond Indebtedness Authorization and Construction Authorization will require separate authorization actions at later dates to be determined.

Moved by __________ Seconded by __________ Carried Yes _____ No _____

AND

I move to approve the Resolution of the Board of Regents regarding authority for the University of Idaho to use future bond proceeds to reimburse the planning and design expenditures associated with the replacement of the Poultry Hill Aquaculture Research facility as set forth in Attachment 2 to the materials submitted to the Board.

Moved by __________ Seconded by __________ Carried Yes _____ No _____
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* PBF Request is under auspices of Department of Administration
# Project is a component of the current Capital Project Development Campaign. Project schedule is TBD and dependent upon fundraising success.
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RESOLUTION FOR EXPENDITURE OF PROJECT FUNDS
AND REIMBURSEMENT FROM FUTURE BOND

A RESOLUTION of the Regents of the University of Idaho authorizing reimbursement of internal University funds expended for planning and design of the project for replacement of the Poultry Hill Aquaculture Research facility on the Moscow campus in Latah County, Idaho.

WHEREAS, the Regents have approved the expenditure of $120,000, for planning and design for replacement of the Poultry Hill Aquaculture Research facility on the Moscow campus located in Latah County, Idaho (the “Project”); and

WHEREAS the University wishes to reimburse its reserves for the monies expended in acquisition of the Project from the proceeds of future bond issuance;

NOW, THEREFORE, BE IT RESOLVED BY THE REGENTS OF THE UNIVERSITY OF IDAHO AS FOLLOWS:

The University may expend monies from its own internal funds for costs of the Project as indicated above and in such event, intends to be reimbursed from the proceeds of its future tax-exempt bonds (the “Bonds”) for any expenditure (“Expenditure”) made on or after a date not more than 60 days prior to the date hereof. Further, that each Expenditure was and will be either (a) of a type properly chargeable to a capital account under general federal income tax principles (determined in each case as of the date of the Expenditure), (b) a cost of issuance with respect to the Bonds or (c) a nonrecurring item that is not customarily payable from current revenues. Further, that the maximum principal amount of the Bonds to be issued for this Project described above, and other projects, is $20,000,000 and the Bonds may finance other University projects. The University reasonably expects on the date hereof that it will reimburse the Expenditures with all or a portion of the proceeds of the Bonds. Further, that the University will keep books and records of all expenditures and will make a reimbursement allocation, which is a written allocation that evidences the University’s use of proceeds of the Bonds to be a reimbursement of Expenditures no later than 18 months after the later of the date on which the Expenditure is paid or the Project is placed in service or abandoned, but in no event more than three years after the date on which the Expenditure is paid. Finally, that this resolution evidences the Agency’s intent and reasonable expectation under Treas. Reg. Section 1.150-2 (d)(1) to use the proceeds of the Bonds to pay the costs of the Project and to reimburse the Agency for expenditures for the costs of the Project paid prior to the issuance of the Bonds to the extent permitted by federal tax regulations.
ADOPTED AND APPROVED the __th day of November, 2013.

THE REGENTS OF THE UNIVERSITY OF IDAHO

By: ________________________________
    Don Soltman, President

By: ________________________________
    Ronald E. Smith, Bursar

ATTEST:

By: ________________________________
    Roderic W. Lewis, Secretary
**Institution/Agency:** University of Idaho  
**Project:** Planning and Design Phase Authorization, Replace Aquaculture Research Facility, University of Idaho, Moscow, Idaho.

**Project Description:** Planning and Design Phase for a project to replace the 90 year old farmhouse housing aquaculture research operations on Poultry Hill, on the main campus of the University of Idaho, Moscow, Idaho. The replacement facility is to be constructed approx 1/3 of a mile west of the existing structure, adjacent to another existing aquaculture research facility. The project will include site prep and improvements, construction of the new research facility, and demolition of the existing aged structure.

**Project Use:** Improving the aquaculture facilities will ensure longevity of important ongoing research programs and will facilitate new opportunities for current and future fisheries faculty at UI. Relocating near the larger existing fish facility will increase critical mass and interaction between staff and faculty, and provide new capacity for funded research projects.

**Project Size:** 7,000 - 7,500 GSF

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### History of Revisions:

- Initial Authorization Request, Planning and Design Phase Only, Aug 2013

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* Internal Strategic Reserves

** Project Contingency
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SUBJECT
FY 2015 Idaho Opportunity Scholarship

APPLICABLE STATUTE, RULE, OR POLICY
S1027 (2013)
Idaho Code § 33-5601 et seq.
IDAPA 08.01.13.010.01 and 08.01.13.300.02.a

BACKGROUND/ DISCUSSION
The intent of the Idaho Opportunity Scholarship is to provide financial resources to Idaho students who are economically disadvantaged, to close the gap between the estimated cost of attending an eligible Idaho institution of higher education and the expected student and family contribution toward such educational costs, and to encourage the educational development of such students in eligible Idaho postsecondary educational institutions. Idaho administrative rules require the State Board of Education annually establish the cost of attendance for purposes of this award determination and the amount of the expected family contribution. While not in statute or rule, the Board has historically set a maximum award in order to increase the number of awardees.

In fiscal years 2008 and 2009, the Legislature appropriated a total of $20M to fund an endowment for this scholarship program. In addition, during those same years the Joint Finance-Appropriations Committee appropriated $1,925,000 to fund current year awards. The corpus and interest earnings from the Opportunity Scholarship Account were used during FY 2010 through FY 2012 to help fund the Opportunity Scholarship program. For FY 2013, several state scholarship programs associated with similar federal scholarship programs were discontinued and their funding was shifted to support $550,800 in Opportunity Scholarships. This was combined with the use of corpus and interest earnings for a total budget of $1,000,000.

The maximum award amount for FY 2014 was $3,000. The majority of full-year student recipients were eligible for the maximum $3,000 award. The scholarship methodology provides “last dollars.” Using this model, not all students will receive full awards.

Administrative Rules require the Board to annually set: (1) the educational costs for attending an eligible Idaho postsecondary educational institution; and (2) the amount of the assigned student responsibility (eligible students are expected to share in the cost of their education and will be required to contribute an amount determined by the Board).

The standard cost of attendance (COA) for FY 2014 award determination purposes was $18,600 for the 4-year institutions and $12,700 for the 2-year institutions.
The amount of the FY 2014 student contribution for students attending 4-year institutions was $6,500 and continuing the amount for students attending 2-year institutions was $4,500. Student-initiated scholarships and gifts from non-federal and non-institutional source counted towards the student contribution.

In FY 2015 the new Opportunity Scholarship program will be in place which will include prior years’ funding for discontinued programs including the Promise A and B scholarships, Minority At-Risk scholarship, and the Student Education Incentive Loan Forgiveness Program. Staff recommends setting the FY 15 award cap, COA, and student contribution at the FY14 levels and using the FY 2015 transition year to gather data to determine the award cap for FY16. This will provide baseline information should the Board choose to award based on total student need or continue capping the award in the future.

**IMPACT**

Setting the COA and student contribution amounts fulfills the Board’s responsibilities under administrative rule. Combined with setting the award cap, this action will enable Board staff to begin processing award applications.

**STAFF COMMENTS AND RECOMMENDATIONS**

Staff recommends approval of the Opportunity Scholarship maximum award in the amount of $3,000 per year ($1,500 per semester).

Staff recommends the FY15 Cost of Attendance for the Opportunity scholarship award formula to be set at $18,600 for students attending 4-year institutions.

Staff recommends the FY15 Cost of Attendance for the Opportunity scholarship award formula to be set at $12,700 for students attending 2-year institutions.

Staff recommends that the FY15 student contribution be set at $6,500 for students attending 4-year institutions and $4,500 for students attending 2-year institutions, and to accept student-initiated scholarships and non-institutional and non-federal aid as part of the student contribution.

**BOARD ACTION**

I move to approve the maximum award amount of the Idaho Opportunity Scholarship, to be $3,000 per year ($1,500/semester) for the fiscal year 2015.

Moved by__________ Seconded by__________ Carried Yes_______ No_______
I move to set the Cost of Attendance to be used in the formula that determines the award for the Opportunity Scholarship at a maximum of $18,600 for 4-year institutions and at a maximum of $12,700 for 2-year institutions for the fiscal year 2015.

Moved by__________ Seconded by__________ Carried Yes_______ No______

I move to set the student contribution for the fiscal year 2015 at $6,500 for students at 4-year institutions and at $4,500 for students at 2-year institutions, and to accept student-initiated scholarships and non-institutional and non-federal aid as part of the student contribution.

Moved by__________ Seconded by__________ Carried Yes_______ No______