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| GRANT PROPOSAL INFORMATION |
| Proposal Initiator |  |
| Email Address |  |
| Phone Number |  |
| Department |  |
| Proposal Name/ Title |  |
| Please provide a brief description or an abstract of this proposal.  |  |
| Funding Agency/ Source |  |
| Annual Funding |  |
| Total Funding |  |
| Grant Duration (start and end dates) |  |
| Proposal Due Date |  |
| List grant Objectives |  |
| List grant activities and/or requirements by the funding agency (i.e. services to be provided, curriculum development, activities, etc.)  |  |
| What are the short-term, and/or long- term requirements/obligations for the college if this proposal is funded?  |  |
| List titles of personnel needed to implement the grant and note if the positions are new or existing.  |  |
| Will it be necessary to reassign existing faculty/staff to implement this grant? If yes, have you obtained approvals? |  |
| Describe how many workstations, office space, and/or facilities will be needed to implementation this grant?  |  |
| List college and/or district strategic Initiatives that this proposal addresses. |  |
| Who will benefit from this grant if funded and how? (College students, faculty, staff, administrators, high school students, other)  |  |
| Does this grant require community or industry partners? If yes, list partner(s). |  |
| Is there a dollar match requirement? If yes, provide details.  |  |
| Is it necessary to seek approval from academic/student services departments to implement the proposed activities? If yes, have you obtained the necessary approvals? |  |
| What information is needed from Institutional Research and Effectiveness to complete the proposal? |  |
| If approved, who will develop the proposal?  |  |
| Will it be necessary to hire grant consultants to prepare this proposal? If yes, provide a cost estimate.  |  |
| **COMMITTEE APPROVAL** |
| *Date:* |  |
| *Approvals:* | Co-Chair:Co-Chair: |
| **ISPC APPROVAL** |
| *Date:* |  |
| *Approvals:* | Tri-Chair:Tri-Chair:Tri-Chair: |