

Grant Proposal Form**PART I****Grant Seeker Contact Information:****Date:**

Name:	
Title:	
E-mail:	
Telephone:	
Division Chair / Supervisor:	
Division / Unit:	

Grant Information:**Proposal Type:** ☐ New ☐ Renewal

Grant or RFP Title:	
Granting Agency:	
Contact:	

Agency Type: ☐ Federal ☐ State ☐ Local ☐ Foundation ☐ Other

Due Date of Proposal:	
Grant Period:	
Amount of Funding Requested:	

Project Description

PART II

(Please answer the questions in Part II regarding your application. If your answer to all seven questions is “NO”, then Part III does not need to be completed. If you answer “YES” to any one of the seven questions in Part II, you must provide adequate explanation for each AND complete Part III).

1. Is Match or Cost Share required for this grant? ☐ Yes ☐ No
2. Can our federal Indirect Cost Rate be applied to this grant? ☐ Yes ☐ No
3. Will the institution be required to sustain the project beyond the grant period? ☐ Yes ☐ No
4. If “YES” to #3, has a business plan been developed to ensure stability of the program?
☐ Yes ☐ No
5. Does the grant request include funding to compensate new personnel? ☐ Yes ☐ No
(NOTE: If “Yes”, this form must be routed to the Director of Human Resources for review and approval)
6. If “YES” to #5, does the personnel expense budget include fringe benefits costs? ☐ Yes ☐ No
7. Does the grant request include funding to compensate existing staff? ☐ Yes ☐ No
(NOTE: If “Yes”, this form must be routed to the Director of Human Resources for review and approval)

FOR THOSE MARKED “YES” IN PART II ABOVE, PLEASE DESCRIBE EACH BELOW:

PART III

PLEASE ANSWER THE FOLLOWING QUESTIONS USING THE BEST INFORMATION AVAILABLE:

How does the grant meet the mission and needs of the institution?

How will the project be implemented? (Include project activities with a timeline)

Who will be involved in the project?

How will the grant funds be used for the project?

Project Approval:

ADMINISTRATOR	SIGNATURE	DATE
Division Chair / Supervisor		
Director of Human Resources <i>(If grant involves funding new or existing personnel)</i>		
Senior VP Academic Affairs OR VP Student Services		
VP of Finance & Administration		
VP of Institutional Advancement		

**** For questions regarding this form, please contact the Grants Administrator.**

Revised 05/19/16