

# Grant Planning Form

Authorization to begin grant writing

Originating Organization

☐ Foundation ☐ District ☐ Cuyamaca ☐ Grossmont

☐ New Proposal ☐ Renewal

Date \_\_\_\_\_

Division/Department \_\_\_\_\_

Title of Project \_\_\_\_\_

Proposal Writer \_\_\_\_\_

Phone \_\_\_\_\_

Administrative Oversight \_\_\_\_\_

Phone \_\_\_\_\_

## PROPOSAL INFORMATION

Due Date \_\_\_\_\_

Expected Funding Period: From \_\_\_\_\_ To \_\_\_\_\_

Submission On-Line ☐ Hard-copy via regular mail ☐

RFP/RFA attached? ☐ Yes ☐ No

Funding Source \_\_\_\_\_

Title of Grant Program \_\_\_\_\_

## BUDGET INFORMATION

Grant funds being requested \$ \_\_\_\_\_

District Match Required? ☐ Yes ☐ No

Percent of indirect allowed \_\_\_\_\_

Required match amount \$ \_\_\_\_\_

Percent in-kind \_\_\_\_\_ Percent as funds \_\_\_\_\_

Match fully secured? ☐ Yes ☐ No

Will additional staff need to be hired? ☐ Yes ☐ No

Will faculty need reassigned time? ☐ Yes ☐ No

Will additional space be needed? ☐ Yes ☐ No

Does the funder require sustainability? ☐ Yes ☐ No

Will technology needs increase? ☐ Yes ☐ No

Will equipment needs increase? ☐ Yes ☐ No

If yes to any of the above, please describe: \_\_\_\_\_

## PROJECT INFORMATION

Describe project goals, scope, expected outcomes, expected impact:

Describe any required partnerships:

How does this project support the strategic priorities of the District?

## APPROVAL OF PROJECT

☐ I have consulted with the Foundation

Responsible Dean's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Dean's Comments: \_\_\_\_\_

Responsible Vice President's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Vice President's Comments: \_\_\_\_\_

Once signatures are obtained, the VP will bring this request to the Cabinet for final approval.

President's signature of approval: \_\_\_\_\_

Date: \_\_\_\_\_

Once approved, requesting party will submit the signed copy to the Dean, Auxiliary, and Campus Business Office.