**Grant Application Form A**

Form A is for grants whose deadlines span more than three months from original application announcements (Request For Application) to final application deadlines.

This form submitted by: Date:

Name of Grant:

Original grant posted (available) date:

Submission deadline: Award date:

Grant authors:

Grant Amount requested:

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| **A. Goals and intended outcomes of the grant:** |

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| **B. Connection of the grant to SLOs, PLOs, ILOs, Education, Facilities, Technology, Strategic Master Plan(s):** |

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| **C. Impact on staffing: identify primary positions to be created and/or reassign time allocated to existing staff.** |

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| **D. Impact on space--possible displacement of existing programs and/or staff:** |

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| **E. Impact on institutional budget-- 50% law, institutional matching contributions, increase/decrease in enrollments, potential for adding to ongoing costs, restricted versus unrestricted funds; requirements for expending:** |

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| **F.**  Identified Manager, Activity Director, for Grant (beyond administration) if any: |

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| **G.** Is there an Impact on specialized categorical programs and non-categorical programs |

**Shared Governance Routing**

*For Review*

Department Chair(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division Dean or Responsible Administrator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Budget Committee Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Senate President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

President’s Council: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*For Approval*

President/Superintendent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_