



CAMPUS GRANTS APPLICATION: FY 2017-18

APPLICANT INFORMATION

PROJECT NAME:

PRIMARY APPLICANT NAME:

PRIMARY APPLICANT DIVISION/DEPARTMENT:

PRIMARY APPLICANT EMAIL:

PRIMARY APPLICANT CAMPUS EXTENSION:

PRIMARY APPLICANT MOBILE PHONE:

PRIMARY APPLICANT JOB TITLE:

CO-APPLICANTS:

YOUR ROLE IN THE PROJECT

Word Limit: 300 or Less.

Start text here.

STATUS OF PREVIOUS GRANTS

If you received a grant previously, what is the status of your project?

Start text here.

ABOUT THE PROPOSAL

IDENTIFY PROJECT

Identify what you are going to do and how you are going to do it.

Word Limit: 300 or Less.

Start text here.

STUDENTS/CONSTITUENTS SERVED

Explain how many students/constituents will be served with this project.

Word Limit: 300 or Less.

Start text here.

PROJECT SUSTAINABILITY:

Please explain how you will sustain your project once funding is no longer available.

Word Limit: 300 or Less.

Start text here.

PROJECT TIMELINE:

Please indicate major timelines, including implementation dates.

Start text here.

PROPOSAL BUDGET

Include brief narrative descriptions, where requested.

PROJECT BUDGET

Total Project Cost:

Total Requested from JALC Foundation:

NON-JALC PERSONNEL INVOLVEMENT

Total Amount requested for NON-JALC Personnel: \$

Please explain how NON-JALC personnel will be working on your project – if applicable.

Word Limit: 300 or Less.

Start text here.

Who are the other sources/funders from which you are requesting funds or personnel?

Start text here.

SUPPLIES/MATERIALS

Total Amount requested for Supplies/Materials: \$

Describe what kind of supplies and materials you will be purchasing if awarded a grant.

Start text here.

EQUIPMENT DESCRIPTION

Total Amount requested for Equipment: \$

Describe the equipment you will be purchasing if awarded grant.

Start text here.

OTHER EXPENSES

Total Amount requested for Other Expenses: \$

Describe other expenses you anticipate and itemize costs. Example: Food, Conference Fees, Transportation, etc.

Start text here.

SUPPLIES/MATERIALS FOR OTHER SOURCES/FUNDERS

Total Amount requested for Supplies/Materials for Other Sources: \$

Describe the supplies and materials you will be requesting from other sources.

Start text here.

If you sought other funding sources for this project and were refused, please explain why.

Start text here.

EQUIPMENT REQUESTED FROM OTHER SOURCES/FUNDERS

Total Amount requested for Equipment from Other Sources/Funders: \$

Describe the equipment requested from Other Sources.

Start text here.

If you requested funding for equipment from another organization and did not receive it, please explain why.

Start text here.

IN-KIND DONATIONS/SERVICES

Describe any in-kind materials, equipment, time, etc. being donated to this project. Please explain who is providing.

Start text here.

SUPPORTING DOCUMENTATION

Any documentation pertinent to this proposal must be attached to the application upon initial receipt at the JALC Foundation.

APPROVAL OF UNIT ADMINISTRATORS

APPLICANT SIGNATURE: _____ **DATE:** _____

DIVISION DIRECTOR SIGNATURE: _____ **DATE:** _____

VICE PRESIDENT SIGNATURE: _____ **DATE:** _____

Deliver the original signed application to the JALC Foundation – B33.

The JALC Foundation Special Projects committee reviews each individual application and any supporting documentation to determine if a proposal shall be approved. Approval does not guarantee a full amount to be awarded. Applicants will be notified of their proposal status by the Executive Director of the JALC Foundation.

Budget for JALC Foundation Campus Grant Proposal

Primary Applicant:

Project Title:

	Item	Amount
<u>Personnel</u>		
	1.	
	2.	
	3.	
	4.	
	5.	
	Category Total:	\$ -

Justification:



<u>Materials/Supplies/Expenses</u>		
	1.	
	2.	
	3.	
	4.	
	5.	
	6.	
	7.	
	8.	
	Category Total:	\$ -

Justification:

Equipment

- 1.
- 2.
- 3.
- 4.

Category Total: \$ -

Justification:

OTHER EXPENSES:

- 1.
- 2.
- 3.

Category Total: \$ -

Justification:

TOTAL PROJECT COST \$ -

TOTAL REQUESTED FROM JALC FOUNDATION \$ -