

## SAN DIEGO MESA COLLEGE INTENT TO APPLY FOR A GRANT

<p>1. Project Title:</p> <p style="text-align: center;">Is this a Renewal grant? Yes ____ No ____ If yes, please complete number 2, 3, 8, and 12 below and submit to the grant office.</p>	
2. Funding Amount Requested:	
3. Application Due Date:	
4. Project Location:	
5. Project Director:	
6. Project Administrator:	
7. Grantor Agency RFA or RFP#:	
8. Funding Period (Duration):	
9. Project Description/Plan:	<p><b>In the space provided below, using 4000 characters or less, please write a brief summary addressing the following:</b></p> <ul style="list-style-type: none"> <li>Description of the project's intent and goals.</li> <li>Match requirements (In-Kind or cash).</li> <li>Anticipated project personnel.</li> <li>How will project facilities requirements be met?</li> <li>Implications for the college/district (How does the project relate to the goals and objectives of the college?).</li> <li>Will this project impact other departments/units? If yes, explain how you plan to include them in the planning process.</li> <li>What are the data or research requirements for this project?</li> <li>How will this project impact instruction?</li> <li>How will this project impact student services.</li> <li>Is Academic Senate approval required?</li> <li>When funding ends, what will happen to this project?</li> </ul> <p>Summary: _____</p>
10. Project Partnership(s):	
11. Reporting Requirements:	
12. Dean/Chair Review:	<p>Date Reviewed: _____</p> <p>Who Reviewed: _____</p>

When submitting this form you must include a copy of the RFA or RFP.  
Submit this form to Dean Fritch ([mfritch@sdccd.edu](mailto:mfritch@sdccd.edu)) or call (619) 388-2789.

For assistance with the completion of this form contact Professor Erica J. Specht ([especht@sdccd.edu](mailto:especht@sdccd.edu)) or call (619) 388-2631.

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**Instructions for Submission of this form**

**1. Project Title:**

Give your project a title that communicates the essence of what you plan to do or achieve with this funding.

**2. Funding Amount Requested:**

State the amount you are requesting for this project. The amount cannot exceed the maximum amount allowable under the RFA/RFP.

**3. Application Due Date:**

This is the date stated on the RFA/RFP when the proposal must be in the funding agency office. (Note: the date your proposal will be due to our District Grants and Contracts Office will be earlier than the date the proposal is due to the funding agency.)

**4. Project Location:**

This should be the primary campus office and/or building for the operations of this project.

**5. Project Director:**

Include this information if you know it, otherwise just state TBD (to be determined).

**6. Project Administrator:**

This will be the Dean or Manager with administrative oversight for the project.

**7. Grantor Agency RFA or RFP#:**

This information can usually be found on the face sheet of the RFA/RFP.

**8. Funding Period (Duration):**

This information should be taken directly off the RFA/RFP. It is the start and end date for the duration of the funding.

**9. Project Description/Plan:**

This is a brief summary that describes the project's scope and outcomes. Please respond to all 10 bulleted items in your summary.

**10. Project Partnership(s):**

List any required partners as stated in the RFA/RFP or any partners you have identified that will be required in order to meet the outcomes of the project.

**11. Reporting Requirements:**

List the reporting requirements for this project. This information should be taken directly from the RFA/RFP and can include monthly, quarterly, annual, and final reporting requirements. If there are fiscal reporting requirements please include those in this section as well.

**12. Dean/Chair Review:**

The proposal needs to be reviewed by the Department Chair and Dean prior to submission. List the date the proposal was reviewed and who reviewed it.

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Cabinet Approved  
03/23/10

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Approved by President's Cabinet: 3/23/10

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