

San Diego Mesa College

7250 Mesa College Drive, San Diego, CA 921 11-4998 (619) 388-2600



DATE: _____

TO: Yvonne Bergland, Dean
Grants Coordinator

FROM: _____, _____
(Dean) (School)

SUBJECT: GRANT/GRANT APPLICATION INFORMATION FOR:

(Title of Grant)

Please complete and forward this cover sheet with a copy of the grant or grant application to Dean Bergland, room A111.

A. Information about this Grant:

Grant				Funding		
Goal	Title	Location (School/Dept)	Originator/PI	Source	Amount	Duration

B. Dean Notification/Approval: _____ Approved: Yes No
(Date Notified)

C. Tracking/Approval Process:

1. Vice President of Instruction or
Vice President of Student Services: _____ Approved: Yes No
(Date Notified)

2. Director of Administrative Services: _____ Approved: Yes No
(Date Notified)

3. President: _____ Approved: Yes No
(Date Notified)

cc: Judy Korab, Business Services

YB/cp
9/8/04