**APPENDIX B**

**PROPOSED GRANT FUNDED PROJECT  
Pre-Submission Form Prior to Proposal Writing**

**INSTRUCTIONS:**

* This form must be completed, reviewed and approved as indicated prior to proceeding with writing the Grant Proposal.
* Obtain perspective of District Grant Development Office regarding feasibility of pursuing Grant. Include the perspective as an attachment to this document.
* If Grant is to be funded through Maricopa Foundation, obtain the review of Director of Development & Community Relations.

1. **PROJECT TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **INITIATOR(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **DIVISION(S)/DEPARTMENT(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **FUNDING SOURCE(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
5. **GRANT PROPOSAL SUBMISSION DEADLINE:**
6. **PROJECT START DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROJECT END DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
7. **EXECUTIVE SUMMARY** (Describe the Project, target population served, expected outcomes, partners, etc.) Attach additional pages as necessary:
8. **COLLEGE STRATEGIC GAALS/PLANNING OBJECTIVES/PRIORITIES** (Indicate all that will be addressed by this Project):
9. **MULTI-YEAR PROJECT? NO YES NUMBER OF YEARS: \_\_\_\_\_\_\_\_\_\_**Amt Requested – Year 1 $ Amt Requested – Year 4 $

Amt Requested – Year 2 $ Amt Requested – Year 5 $

Amt Requested – Year 3 $

**TOTAL AMOUNT REQUESTED (All Years) $**

1. **MATCH REQUIREMENT** Cash and/or In-Kind (Provide details, e.g., staff time, space, renovation costs, etc.):
2. **PROJECT IMPACT** (Identify new staff to be hired, intended impact on the college and participants, equipment to be purchased, requirements to sustain project after funding ends, etc.):
3. **REVIEWS**

* **CAMPUS DIRECTOR OF DEVELOPMENT & COMMUNITY RELATIONS, with Comments:**

(If funded through Maricopa Foundation)

**Signature Date**

* **CAMPUS GRANTS COORDINATOR, with Comments:**

**Signature Date**

* **MANAGER/DIVISION CHAIR, with Comments:**

**Signature Date**

* **RESPECTIVE VICE PRESIDENT, with Comments:**

**Signature Date**

* **PRESIDENT’S LEADERSHIP TEAM (PLT) as information, with Comments:**

**Signature Date**

* **COLLEGE PRESIDENT APPROVE DENY**

**Comments:**

**Signature Date**

**Cc: Vice President of Administrative Services**

**Budget Manager**