

PROPOSAL APPROVAL SUMMARY

In order to expedite processing a proposal and its subsequent tracking, it is imperative that the following information be provided when a proposal is submitted for signature. The proposal, budget, and signatory cover sheets (if applicable) must accompany this form. If you have any questions regarding submitting a proposal or completing this form, please contact District Grants Development and Management Department at (480) 731-8019. Additional forms may be obtained at: www.maricopa.edu/grants/

MCCCD PROJECT TITLE:

RFP TITLE/CATEGORY:

PROJECT ADMINISTRATOR:

COLLEGE/CENTER:

PHONE:

PROJECT DIRECTOR:

COLLEGE/CENTER:

PHONE:

ORIGINAL FUNDING SOURCE:

CONTACT NAME & PHONE:

PASS THROUGH AGENCY:

CONTACT NAME & PHONE:

AMOUNT REQUESTED-YEAR 1: _____

AMOUNT REQUESTED-YEAR 4: _____

AMOUNT REQUESTED-YEAR 2: _____

AMOUNT REQUESTED-YEAR 5: _____

AMOUNT REQUESTED-YEAR 3: _____

TOTAL AMOUNT REQUESTED: _____

MATCH REQUIRED? () REQUIRED () NOT REQUIRED () ENCOURAGED

MATCH AMOUNT \$ _____

INDIRECT COST RATE:

START DATE:

SUBMISSION DEADLINE:

END DATE:

PROJECTED DATE OF AWARD:

PROPOSAL DEVELOPED BY:

BRIEF DESCRIPTION OF PROJECT:

EXPECTED BENEFITS:

APPROVAL: _____

DATE: _____

Signature of College President/Provost

Instructions for Filling Out the Proposal Approval Summary

MCCCD Project Title: Enter the name that you have given your project.

RFP Title/Category: Enter the name of the grant program to which you are applying. Examples include: Advanced Technological Education (ATE); Minority Science and Engineering Improvement Program (MSEIP); and Hispanic Serving Institutions Assisting Communities (HSIAC).

Project Administrator: This item should only be filled out if the project has both an administrator and a director overseeing the project. For example, sometimes a Dean/VP will be considered the Project Administrator, while a faculty/staff member is considered the Project Director.

College/Center of the Project Administrator: Enter the name of the college or center where the Project Administrator is located. This item should only be filled out if a Project Administrator has been identified.

Phone of the Project Administrator: Enter the telephone number of the Project Administrator. This item should only be filled out if a Project Administrator has been identified.

Project Director: Enter the name of the Project Director who will oversee the grant project.

College/Center of the Project Director: Enter the name of the college or center where the Project Director is located.

Phone of the Project Director: Enter the telephone number of the Project Director.

Original Funding Source: Enter the name of the source from which you are requesting funding.

Contact Name & Phone: If known, enter the name and telephone number of the contact person at the funding agency from which you are requesting funding.

Amount Requested: Enter the amount of funding requested for each year of the project, including the total amount requested. Funding periods may vary from one year to five years, so enter information only for those years pertinent to your grant proposal.

Match Required: Check the area that applies to your grant project, whether match is required, not required, or encouraged.

Match Amount: If match is required, enter the amount that your grant project is providing.

Indirect Cost Rate: Enter the indirect cost rate to be allocated for your project. If you do not know the appropriate rate, contact the District Grants Development and Management Department. If indirect costs are not allowed for your grant competition, indicate this with "Not allowed."

Start Date: Enter the date when your project will commence.

Submission Deadline: Enter the date when your grant proposal is due.

End Date: Enter the date when your project will conclude.

Projected Date of Award: Enter the anticipated date when awards will be announced.

Proposal Developed By: Enter the name of the individual(s) who developed/wrote the proposal.

Brief Description of Project: Provide a brief description of your project, which may include the overarching goal of the project and its key elements.

Expected Benefits: Enter the project's expected benefits, which may impact the institution, students, disciplines, faculty, industry, the community, etc.

Approval: Obtain the signature of your president and return to the District Grants Development and Management Department.