## **Intent to Apply for Grant Funding Opportunity**

CONTACT INFORMATION							
Project Initiator:		Area Vice President:					
Co-Initiator:		Area Dean:					
FUNDING OPPORTUNITY INFO	RMATION						
Sponsor:		Sponsor Type:					
Program Name:							
Is this a subaward?	Primary i	Applicant:					
Type of grant:		Project Duration:	Due Date:				
Link to solicitation:							
PROGRAM INFORMATION							
Program Purpose:							
Target Population(s) (list all tha	at apply):						
PARTNERS & SUBAWARDEES							
Partner Name & Institution/Or	ganization	Commitment	Proposed Fundi	ng			
FINANCIAL INFORMATION							
Budget Year One:		Budget All Y	ears:				
Facilities & Administrative (F&	A) Costs:	Restricted F&A Rate:					
Match/Cost Share:		Match/Cost Share Rate:					
Match/Share Source:		Other Match Source:					

Classification

**Time Commitment** 

**Grant Funded Personnel Name/Title** 

## **FINANCIAL INFORMATION (continued)**

If additional or new space will be required to support the staff, activities & objectives of this project, provide proposed department, building and/or location and space requirements.

## **MVC INTEGRATED STRATEGIC PLAN**

Indicate how the program purpose and services of this project align with MVC's Integrated Strategic Plan. Check all applicable.

- I. Equity with a Specific Focus on Social Justice and Racial Equity
- II. Fully Implement a Guided Pathways framework (Access, Success, and Equity)
- **III. Community Engagement & Partnerships**
- **IV. Institutional Effectiveness and Resources**

PRESIDENT'S	CABINET APPROV	L		
Yes	No			
President's Sig	nature:		 Date:	
Area Vice Pres	ident's Signature: _		 Date:	
Comments:				

comments: