

APPLICATION INFORMATION

Project Name

Primary Applicant Name

Primary Applicant Division/Department

Primary Applicant Email

Primary Applicant Campus Extension

Co-Applicants

Summarize this project (300 words or less)

Your role in this project (300 words or less)

Have you applied for an LCCC Foundation Campus Grant in the past? If so, please explain the outcome(s).

If you received a Campus Grant last cycle, what is the status of your project as of this submission?

ABOUT THIS PROPOSAL

IDENTIFY PROJECT: Identify what you are going to do and how you are going to do it (300 words or less)

STUDENTS/CONSTITUENTS SERVED: Explain how many students/constituents will be served with this project.

PARTNERSHIPS: Did you consider partnering with another department at LCCC on this project? If not, why?

INCORPORATING VISION 2020 PRIORITIES: How does your project support one or more of the following priorities?

1. Drive Student Completion for Academic & Career Services
2. Lead Talent Development While Accelerating Business & Job Growth
3. Inspire Community Engagement, Connectivity, Diversity & Wellness

FOUNDATION CORNERSTONES: Which Cornerstone will your project support? (Select up to two)

Economic: Growing jobs, building workforce, nurturing entrepreneurship

Education: Creating affordable access, enhancing quality, designing pathways

Cultural: Inspiring diversity, enhancing opportunity, showcasing talent

Community: Bridging gaps, establishing partnerships, promoting collaboration

PROJECT SUSTAINABILITY: Please explain how you will sustain your project once funding is no longer available. (300 words or less)

PROPRIETARY RIGHTS: Will your project generate any form of intellectual property which may be used or marketed outside of Lorain County Community College? (LCCC Foundation policy will require an express agreement for the sharing of profits arising from products developed with LCCC Foundation financial support).

PROJECT TIMELINE: Please indicate major timelines, including implementation dates, the MID-YEAR FINANCIAL REPORT, and the submission of the FINAL REPORT to the LCCC Foundation.

July 1, 2019	Grant Period Begins
January 14, 2020	Mid-Term Reports Due
June 30, 2020	Grant Cycle Ends
July 13, 2020	Final Reports Due

Your timeline:

PROPOSAL BUDGET

Include brief narrative descriptions, where requested. Please use the provided "Campus Grants Proposed Budget" template to complete the following. You can replicate the justification statement.

PROJECT BUDGET

1. Total project cost:
2. Total requested from LCCC Foundation:
(cannot exceed \$10,000)

NON-LCCC FOUNDATION PERSONNEL INVOLVEMENT

Total amount requested for NON-LCCC Personnel:

Please explain how NON-LCCC personnel will be working on your project - if applicable.

Who are the other sources/funders from which you are requesting funds or personnel?

SUPPLIES/MATERIALS

Total amount requested for Supplies/Materials:

Describe what kind of supplies/materials you will be purchasing, if awarded a grant.

EQUIPMENT COMMITTEE REQUEST OUTCOME

You must first request equipment from the College's Equipment Committee before requesting from the LCCC Foundation Grants Program. Please explain the outcome of that request here. If your application involves equipment purchases and you have not processed your request through the Equipment Committee, please explain why.

EQUIPMENT DESCRIPTION

Total amount requested for Equipment:

Describe the equipment you will be purchasing if awarded this grant:

OTHER EXPENSES

Total amount requested for Other Expenses:

Describe other expenses you anticipate and itemize costs. Example: Food, Conference Fees, Transportation, etc. Also include any editing costs for books or other publication projects.

SUPPLIES/MATERIALS FROM OTHER SOURCES/FUNDERS

Total amount requested for Supplies/Materials from Other Sources:

Describe the supplies and materials you will be requesting from other sources.

If you sought other funding sources for this project and were refused, please explain why.

EQUIPMENT REQUESTED FROM OTHER SOURCES/FUNDERS

Total amount requested for Equipment from Other Sources/Funders:

Describe the equipment requested from Other Sources.

If you sought other funding sources for this project and were refused, please explain why.

IN-KIND DONATIONS/SERVICES

Describe any in-kind materials, equipment, time, etc. being donated to this project. Please explain who is providing.

Describe any in-kind services you or your group will provide.

SUPPORTING DOCUMENTATION

Any documentation pertinent to this proposal must be attached to the application upon initial receipt by the LCCC Foundation. **Be sure to include your Campus Grants Budget Proposal Template.**

APPROVAL OF UNIT ADMINISTRATORS

APPLICANT'S SIGNATURE: _____ **DATE:** _____

DIVISION DIRECTOR SIGNATURE: _____ **DATE:** _____

VICE PRESIDENT SIGNATURE: _____ **DATE:** _____

**DELIVER THE ORIGINAL SIGNED APPLICATION TO THE LCCC FOUNDATION OFFICE - CC220
BE SURE TO KEEP A COPY FOR YOUR RECORDS!**

The LCCC Foundation Campus Grants committee reviews each individual application and any supporting documentation to determine if a proposal shall be submitted for approval to the LCCC Foundation Board of Directors. Approval does not guarantee a full amount to be awarded. Applicants will be notified of their proposal status through an award/declination letter.

PROPOSED BUDGET

Primary Applicant Name: _____

Project Title: _____

#	Item	Amount
PERSONNEL		
1.		
2.		
3.		
4.		
5.		
PERSONNEL Total		
Justification:		

EQUIPMENT		
1.		
2.		
3.		
4.		
EQUIPMENT Total		
Justification:		

MATERIALS/SUPPLIES/EXPENSES		
1.		
2.		
3.		
4.		
5.		
6.		
7.		
MATERIALS/SUPPLIES/EXPENSES Total		
Justification:		

TRAVEL/CONFERENCES		
1.		
2.		
3.		
TRAVEL/CONFERENCES Total		
Justification:		

TOTAL PROJECT COST

TOTAL REQUESTED FROM LCCC FOUNDATION