



2017- 2018 College of Completion Innovation Grant Application

***** Applications will be accepted starting March 1, 2017 and due April 17, 2017 *****

The Foundation anticipates awarding up to \$20,000 each academic year to projects that align with the college’s Annual Implementation Plan (AIP). Priority will be given to projects that have measurable outcomes and where impact of activity can be evaluated.

GRANT REQUEST FOR: _____

AMOUNT REQUESTED: _____

DETAIL OF REQUEST: Attach information that provides specific responses to the following:

- (1) Describe the project or purpose for which the funds are requested.
- (2) Describe which objective(s) of the Annual Implementation Plan the project aligns with.
- (3) Will the project benefit if the request is only partially funded?
- (4) Complete the attached budget summary.

APPLICANT: _____ / _____
(Signature) (Print Name)

TITLE/POSITION: _____ Date _____

Approval by Director/Dean and Vice President is required.

This proposal is in agreement with the goals and objectives of this department and represents priorities in the Annual Implementation Plan.

DIRECTOR/DEAN: _____ Date _____

VICE PRESIDENT: _____ Date _____

Additional Comments:



Budget Summary

GRANT REQUEST FOR: _____

AMOUNT REQUESTED: _____

APPLICANT: _____

Table with 2 columns: Description and Amount. Rows include Certificated Salaries, Classified Salaries, Benefits, Supplies, Operating, Capital Outlay, and Total.

*Attach copies of invoices, quotes or estimates if applicable.

Additional Comments by Applicant (you may attach additional sheets of paper):

Thank you for your application. For any questions or inquiries please contact the Citrus College Foundation Office at 626 914-8825 or foundation@citruscollege.edu

Citrus College Foundation Office Use Only:

Date Received: _____

By: _____

Requirement Checklist:

____ Signed by Director/Dean
____ Detail of Request

____ Signed by Vice President
____ Budget Summary