

Cañada College Grants Intent to Apply Form (Part 1 of 3)

Instructions

- 1. Prior to applying for any grant (including renewals), faculty and staff must consult with the Dean (or other administrative supervisor) at least 2 months prior to a grant deadline to obtain approval for developing a proposal.
- 2. The Dean will complete the Intent to Apply Form, along with the potential applicant, to make a decision whether to apply.
- 3. If the Dean decides to approve developing a proposal and intends to apply, then the Dean will submit this Form, <u>along with a rough budget</u>, to the following entities to provide notice of intent to apply: a) President's Cabinet, b) Planning and Budgeting Council, and c) College Business Office which is responsible for informing the District Office Grants Analyst.

| I. Applicant Information | | |
|--|---------------------------------|------------------------|
| Name: | Division/Department: | |
| Email: | Phone: | |
| Lead Organization if not Cañada College: | | |
| Other possible partners (internal or external): | | |
| Describe below the proposed activities of the gran Education Master Plan goals and strategic initiati (Max. 350 words) | | |
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| | | |
| II. Grant Information | | |
| Funding Agency: | Link to Agency Website: | |
| Grant Solicitation Title: | Link to Solicitations: | |
| Grant opportunity number: | CFDA number: | |
| Grant Submission Due Date: | Grant Period (start/end date): | |
| Grant Submission requirements, special instruction | ons (e.g. online, copies, etc): | |
| | | |
| III. Budget and Resource Information | | |
| Average Award Amount: | | |
| Indirect Cost % (Federal Rate): | | |
| Matching Costs Required: No Yes | If yes, provide amount: | Describe source below: |
| | | |

Describe other resources that will be needed, e.g. facilities, technology, equipment:



Cañada College Grants Intent to Apply Form (Part 2 of 3)

IV. Criteria for Decision Making

| Program or Project Name: | | Division/Departm | ent: | | |
|---|--|-------------------------------------|------|------------|--------|
| A | Applicant Name: Date: | | | | |
| | | | D | ecision Fa | ictors |
| If NO is checked for items 1-5, then your project is ineligible. | | Yes | No | Somewhat | |
| | Does your project align with the College Mission, faster Plan goals and objectives? | Vision, Program Review, Education | | | |
| 2. | Is there adequate time to effectively prepare and ap | ply by the deadline? | | | |
| 3. | Have you identified a potential funder? | | | | |
| 4. | Will the grant pay for a project director, or is there someone else available and authorized to commit the time required to serve as project director? | | | | |
| 5. | Are other College resources identified and available to support the project, such as required matching funds, space, facilities, technology? | | | | |
| 6. | Will the project require you hire additional personn | el? | | | |
| 7. | Does the funder require institutionalization of the project beyond the funding period? | | | | |
| 3. | Are the post-award requirements (reporting, monitoring) reasonable given staffing and other resources of the project? | | | | |
|). | Is there a strong project team (including internal and experience, commitment to the project and working | | | | |
| 10. | Have you consulted with Planning, Research, Insti | tutional Effectiveness unit? | | | |
| 11. | . Have you consulted other units? e.g. Professional | Learning, Counseling? | | | |
| 2. | Does the funder allow indirect? If there is a cap, pl | ease specify | | | |
| 3. Will the project require that the College issue subawards? If so, about how many | | | | | |
| 4. | Does the College have any history with the funding | g agency? | | | |
| 5. | Have you reviewed <u>District Board Policy 6.30 Externograms?</u> | ernally Funded Special Projects and | | | |
| | | | | | |
| | Dean's Recommendation | | | | |
| | Pursue project and develop proposal | | | | |
| | Do not pursue at this time | | | | |
| Ι | Dean (or other Administrative Supervisor) Signature | | Date | | |



Cañada College Grants Intent to Apply Form (Part 3 of 3)

| Program or Project Name: | ram or Project Name: Division/Dept. | | | | | | | | |
|--|--|-------------------|--|--|--|--|--|--|--|
| Applicant Name: | Date: | | | | | | | | |
| V. Organizational Accountability Identify the department which will manage the grant: | | | | | | | | | |
| VI. Personnel: Please list all project personnel below. Time Commitment | | | | | | | | | |
| Name | Title | (%FTE or hours) | | | | | | | |
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| Will this project require that you hire new employees? Describe role of new employees | No Yes | If yes, how many? | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| VII. Signatures approving proposal submission | | | | | | | | | |
| Applicant: | | Date: | | | | | | | |
| Dean: | | Date: | | | | | | | |
| Vice-President of Instruction: | | Date: | | | | | | | |
| Vice-President of Student Services: Date: | | | | | | | | | |
| Vice-President of Administrative Services: | Vice-President of Administrative Services: Date: | | | | | | | | |
| Dean of Planning, Research and Institutional Effectiveness: | | Date: | | | | | | | |

Reminder: Include a rough budget with this form. Note if you have a budget template already prepared per the grant funding agency guidelines, you may submit that. The Dean will submit this Form, along with the rough budget, to the following to provide notice of intent to apply: a) President's Cabinet, b) Planning and Budgeting Council, and c) College Business Office which is responsible for informing the District Office Grants Analyst.