

This form gives institutional approval to move forward with seeking grant funding. Complete, sign and submit it to the Grants Manager along with your Grant Proposal Packet. The Grants Manager will forward it to the Executive Team for approval.

PROJECT					
Project Name					
Project Lead				Department	
Contact Information		email:		phone:	
GRANT					
Funding Agency					
Grant Program Name					
Grant Program URL					
Submission Deadline Date		Length of Grant Period		Total Grant Request Amt.	
Is there a College Match Requirement?		Y N			
Will BMCC sustain the project after the grant?		Y N			
ASSURANCES					
Grant Proposal Packet is complete and attached to this form.				Project Lead initials _____	
The project and proposed budget are supported by Project Lead's dean/direct supervisor.				Dean/Direct Supervisor initials _____	
APPROVAL – signature from a supervising VP indicates clearance to apply					
Grants & Operations Accountant initials _____		Grants Manager initials _____			
Supervising VP _____			Date _____		
President _____			Date _____		

**NEXT STEPS**

1. **Supervising VP** - return form to Grants Manager
2. Develop grant application narrative and budget. Support and references available.
3. Contact Grants Manager to submit your application.