

# GRANT APPLICATION ASSISTANCE REQUEST FORM



## APPLICANT INSTRUCTIONS:

*Meet with and obtain approvals with the appropriate department heads, Division Chair and Vice President of Academic Affairs prior to completing and submitting a grant request form.*

Name of Foundation, Organization or Individual(s) you wish to solicit: \_\_\_\_\_

Is this a federal grant?      Yes      No

Does grantor already support Ozarks? \_\_\_\_\_

If so, how?

Amount of Grant you wish to seek:      \$ \_\_\_\_\_

Are matching funds required? \_\_\_\_\_

If so,

1) How much, and what qualifies for a match?

2) How will the match be funded and who will be responsible for acquiring the match?

Have you discussed this project with your Division Chair/Supervisor and/or appropriate Vice President? \_\_\_\_\_

If so, what were the specific areas of concern or focus?

## **Please describe the following components of the project.**

Problem that granted funds would help solve:

Population project will serve:

Budget:

Personnel required to implement and manage project (i.e. faculty, staff, facilities maintenance, computer services, etc...):

Name of Principal Investigator:  
The Principal Investigator is responsible for narrative and financial reporting.

Length of time to complete the project: \_\_\_\_\_

Is reporting required by grantor?    Yes            No            If so, how often? \_\_\_\_\_

Does this grant imply an ongoing cost to the University for any reason? \_\_\_\_\_ If so, please explain:

How will the project be funded once grant is depleted?

Please include/attach a copy of the Request for Proposals (RFP).

**Submitted by:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Division Chair/Supervisor:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Vice President/Provost Approval:** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_  
**Vice President for Advancement and Alumni Engagement** **Date** \_\_\_\_\_