

ALAMANCE COMMUNITY COLLEGE

Office of Institutional Advancement

Grant Assistance Request Form

Date: _____
Department or Division: _____
Person Submitting Form (phone / email): _____

I need assistance with ___ researching sources / ___ writing / ___ getting letters of support / ___ developing a budget / ___ reviewing & editing ___ other ___

Estimated Project Budget: \$ _____
Possible sources for funds: _____
If funded, who will administer / supervise project and budget? _____

Project Summary:

How does this proposal relate to the goals of your Department or the Mission and Strategic Plan of the College?

Requester Signature: _____ Date: _____

Administrative Approval to Proceed:
Department Head / Coordinator / Supervisor _____ Date: _____
Dean / Director _____ Date: _____
Vice President _____
Executive Vice President _____

Review and recommendation by President's Cabinet
Approved ___ Disapproved ___ Date: _____

President's Decision: Approved ___ Disapproved ___

Signature _____ Date _____

Date submitted to grant writer _____

****Once you have selected a grant source, you must complete the Grant Notification Form in order to proceed.****