



**GRANT APPLICATION APPROVAL FORM**

**(Attach to: final draft of complete application packet, approved "Request to Proceed," RFP, & abstract)**

The Project Director is responsible for regularly consulting with the project-appropriate deans, vice presidents, or other administrators during grant development and for working with the Grants Office to obtain any required supporting documents, data, and signatures necessary to complete the grant application. The Project Director should obtain the Division Dean's signature prior to submitting this form to the Grants Office. The Grants Office will route the form and application packet (which reflects divisional revisions) to obtain the remainder of the signatures **AT LEAST ONE WEEK** prior to the grant deadline.

Project Title: \_\_\_\_\_

Funding Source/Program name and number (if any): \_\_\_\_\_

Project Director: \_\_\_\_\_ Date: \_\_\_\_\_

Grant Deadline: \_\_\_\_\_ Delivery Method: \_\_\_\_\_

Project Period: \_\_\_\_\_ to \_\_\_\_\_

Project Cost: PVCC Contribution:  
Partner(s) Contribution:  
Grant Amount Requested:  
Direct:  
Indirect:  
TOTAL:

For PVCC Contribution, is this a required match?  YES  NO

Cash \$ \_\_\_\_\_ In-Kind (specify) \$ VALUE \_\_\_\_\_

**Faculty/Staff Resources**

Name (indicate if new)	Percent Effort	Funding Source	Release Time Needed?
_____	_____ %	<input type="checkbox"/> Grant-funded <input type="checkbox"/> In-kind	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____ %	<input type="checkbox"/> Grant-funded <input type="checkbox"/> In-kind	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____ %	<input type="checkbox"/> Grant-funded <input type="checkbox"/> In-kind	<input type="checkbox"/> Yes <input type="checkbox"/> No

Will you need part-time faculty to cover team member regular responsibilities?  YES  NO

College commitment/resources required to continue activities after grant:

**FINAL APPROVALS:**

Approved     Not Approved

\_\_\_\_\_  
Grants Officer / Date

Comments/suggested revisions:

Approved     Not Approved

\_\_\_\_\_  
Division Dean / Date

Comments/suggested revisions:

Approved     Not Approved

\_\_\_\_\_  
Vice President ISS / Date

Comments/suggested revisions:

Approved     Not Approved

\_\_\_\_\_  
Vice President Finance / Date

Comments/suggested revisions:

Approved     Not Approved

\_\_\_\_\_  
President / Date

Comments/suggested revisions:

DISPOSITION:     APPROVED to Submit     NOT APPROVED to Submit    \_\_\_\_\_  
Date