Proposal Approval Summary Form

This form must be completed, returned to the Grants Office, and reviewed by President's Cabinet before submitting a grant proposal. If you have any questions regarding this form or the proposal development process, please contact the Grants Office at grants@mtsac.edu.

Principal Investigator/Project Director

Name		Department	
Email		Phone	

Other Project Collaborators

Name		Department	
Name		Department	
Name		Department	
Name		Department	

Funding Opportunity Details

Opportunity Name	
Sponsoring Agency	
Pass-through Entity (if applicable)	
Sponsor Type	☐ Local ☐ State ☐ Federal ☐ Private
Proposal Type	☐ New ☐ Renewal ☐ Resubmission ☐ Amendment
Submission Deadline	Note: deadline extended to June 30, 2024

Funding Amount		Project Duration	
Proposed Start Date		Proposed End Date	

Does the opportunity require 501(c)(3) status?	☐ Yes ☐ No	If yes, the project team must coordinate the submission with the Mt. SAC Foundation.

Are indirect costs allowed? (check appropriate box)	☐ Yes ☐ No	Indirect Cost Rate (if applicable)	

Is match required? (check appropriate box)	☐ Yes ☐ No	Match Amount (if applicable)	
If match is required, how do you intend to satisfy this requirement?			

Project Summary

Use the following prompts to provide an overview of the proposed project. If desired, attach additional information to this form.

Project Description What need will the project address? What activities will be implemented?	

Expected Outcomes What are the project's expected benefits/ outcomes?	

Partners If applicable, list partners and their roles in the project. Will Mt. SAC issue sub-awards?	

Budgetary Needs Describe the project's budgetary needs. For personnel, specify type(s). For faculty reassignment/ overload requests, specify the names and planned allocation of time.	

Sustainability Plan What is the plan for continuing grant activities beyond the project period?	

Assurances

☐ As the Project Lead, I acknowledge the responsibility associated with this role and will conduct the proposed project in accordance with the terms and conditions of the sponsoring agency and the policies of the College.

☐ If the proposal described herein is funded and accepted by the College, I will be responsible for meeting the requirements of the award, including, but not limited to, providing the proper stewardship of sponsored funds and submitting all required progress reports and deliverables on a timely basis.

☐ If sponsored funds are used for personnel, I understand that the College makes no ongoing commitment beyond the project period.

☐ Where funds are requested for lecture hour equivalents, I have reviewed this request with my Educational Administrator, and they support the reassignment/overload request.

_____   _____   _____
Signature of Project Lead   *Date*   *Title*

Approval

Approvals represent general approval of details outlined in the project summary, but they do not represent specific approval of personnel titles, classifications, salary rates, or other issues governed by College policy and collective bargaining agreements.

_____   _____   _____
Signature of Responsible Administrator   *Date*   *Title*

_____   _____   _____
Signature of Responsible Vice President   *Date*   *Title*

Review by President's Cabinet

Date of Review	☐ Approved ☐ Conditionally Approved ☐ Denied

Comments	

Guidance for Completing
Proposal Approval Summary Form

Principal Investigator/Project Director: Enter the name, department, email, and phone number for the individual who will lead the implementation of the proposed project.

Other Project Collaborators: Enter the names and departments of any other project collaborators. If you need additional space, please attach the list to this form.

Opportunity Name: Enter the name of the funding opportunity for which you are applying. Examples include: Advanced Technological Education, Humanities Initiatives at Community Colleges, Los Angeles Scholars Investment Fund, and California Apprenticeship Initiative.

Sponsoring Agency: Enter the name of the agency sponsoring the funding opportunity. Examples include: U.S. Department of Education, California Community Colleges Chancellor's Office, and Lumina Foundation.

Pass-through Entity: If Mt. SAC will be partnering (sub-award) with another lead applicant, enter the name of the lead applicant as the pass-through entity. Examples include: California State Polytechnic University Pomona, University of La Verne, and University of California Riverside.

Sponsor Type: Check the appropriate box regarding the type of sponsoring agency.

Proposal Type: Check the appropriate box regarding the type of proposal. "New" refers to proposals being submitted for the first time. "Renewal" refers to proposals that have been previously awarded and require periodic submissions to maintain funding. "Resubmission" refers to proposals that have been previously submitted but not awarded. "Amendment" refers to proposals that are requesting augmentations to existing funding agreements.

Submission Deadline: Enter the date when the grant application is due.

Funding Amount: Enter the amount requested for the entire proposed grant period.

Project Duration: Enter the length of the project (e.g., 18 months, 5 years).

Proposed Start Date: Enter the date when your project will commence.

Proposed End Date: Enter the date when your project will conclude.

501(c)(3) Status: Check the appropriate box regarding the program's 501(c)(3) requirements. If the funding opportunity requires 501(c)(3) status, the Grants Office will assist the project team in coordinating with the Mt. SAC Foundation.

Indirect Costs Allowed: Check the appropriate box regarding the program's allowability of indirect costs. Indirect costs may also be referred to as facilities and administrative (F&A) costs.

Indirect Cost Rate: If indirect costs are allowed, enter the rate specified in the funding opportunity notice.

Match Requirement: Check the appropriate box regarding the program's matching requirements.

Match Amount: If match is required, enter the amount.

Match Description: If match is required, describe how you will satisfy this requirement.

Project Description: Provide a brief description of the project, including the need or problem being addressed and the proposed activities.

Expected Outcomes: Enter the project's expected benefits and outcomes, which may include impacts on the institution, students, disciplines, departments, faculty, the workforce, the community, etc.

Partners: Describe any partners, both internal and external, and their specific roles in the project. Indicate if Mt. SAC will issue sub-awards to any of these partners.

Budgetary Needs: Enter the anticipated budgetary needs, which may include personnel, fringe benefits, supplies, software, travel, consultants, equipment, facilities, student aid, etc. For personnel costs, specify type (e.g., faculty reassigned time/overload, classified, management, short-term hourly, student). For faculty reassignment/overload requests, specify the names and planned allocation of time for each person.

Sustainability Plan: Specify if the funding agency require activities/personnel to be institutionalized beyond the grant period. Describe the project's plan for sustaining grant activities when the grant ends.

Assurances: The Project Lead will acknowledge the assurances by checking each box and adding the signature, date, and title.

Approval: Obtain the signature of the responsible administrator for the project (e.g., dean) and the responsible vice president, and then return the completed form to the Grants Office.

Review by President's Cabinet: The Grants Office will share the completed form for consideration at the next President's Cabinet meeting. If approved, the Grants Office will contact the Project Lead to commence proposal development.