NMSU Doña Ana Community College



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DACC Grant Approval Form

This form enables key college leaders to be informed and approve grants and ensure the feasibility of your project. All individuals interested in pursuing new grant funding must complete this form prior to submitting any proposals through NMSU OGC or the NMSU Foundation. For more information contact Kristi Martin <u>kmartin@dacc.nmsu.edu</u> or Nancy Tinajero <u>ntinajero@dacc.nmsu.edu</u>

Grant Committee/PI Contact Information

Name: _____

Email: _____

Phone: ____

Proposed Project Title: _____

Department/Program/Unit: _____

Link(s) to Request for Proposals (RFP)/Program Announcement:

Project Deadline(s): _____

Departments/Programs/Units involved

List all departments/programs participating in this project or that would be affected by this project. (for example, academic units, student services, advising, computer support, facilities, institutional effectiveness).

Name, Title, Department/Program

Will you need facilities support? 🗆 No	🗆 Yes	Not yet sure
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Describe your facility needs (e.g., Do you need a dedicated office or classroom space for the project? Or will you need access to lab facilities that you do not currently have?): 250 limit

Describe your needs (e.g., Do you need a hardware installation, software support or technical assistance?):

Will you need data analysis or statistical information?

□ No □ Yes □ Not yet sure Describe your needs:

NOTE: Each individual listed above, please keep this form for your records **and send an email with comment/approval** to <u>kmartin@dacc.nmsu.edu</u>. This acknowledges that the proposal has been discussed with the Grant Committee or Pl and you approve or deny this proposal.

Budget Information For questions contact Nancy Tinajero in the DACC Office of Grants and Contracts (528-7213)				
Projected Project Total \$				
Are matching funds required? No Yes Does the funder require a cash match? No What are the sources you intend to use for matching	If so, what percentage?% □ Yes g funds?			
Does Funder allow indirect charges?	es Allowable Indirect Rate:			
Duration of Funding: Estimated Start Date	Estimated End Date			
At the conclusion of the project, what aspects of the project must be institutionalized (sustainability)? (For example, staff positions, office space, technology, equipment)				

Project Information

Provide a brief overview of the project, explicitly stating the need for this project, how the project aligns with the department or unit and the expected outcomes. If you have a draft of the grand you can submit the draft: (Limit 500 words)

Describe how this project integrates with the DACC's Strategic Plan, and/or other planning documents and brings value to the College: (Limit 500 words)

What is the project's target population/focus area? (check all that apply)

□ Assessment and Planning	Professional Development	
□ Basic Skills	🗆 STEM (Science, Technology,	
□ Community Partnerships	Engineering & Math)	
Developmental Education	Student Success	
□ Facilities/Renovation	Student Support	
□ Graduation/Transfer	Technology	
□ Specialized Student Population(s) (please specify)		
□ Specific Discipline (please specify)		
□ Instructional Support (specify industry sector/s)		
□ Career and Technical Education (specify industry sector/s)		
Other (please specify)		

Key Project Personnel				
List all project personnel below. Include PI, Co-PI and key grant-funded positions:				
Name Title/Role in Project	Time Commitment (% FTE or hours)			
Will this project require that you hire new employees	-			
If so, approximately how many regular employees How will you fund these positions?				
\Box With this grant \Box With release ti	me			
Other (specify):				
Project Partn	ers			
	Yes 🛛 Not yet sure			
Indicate all project partners below:				
□ NMSU System (please list):				
□ Non-Profit/Community-Based Organizations (pl	ease list):			
□ Other Colleges or Universities (please list):				
□ K-12 Institutions (please list):				
Industry/Business (please list):				
□ Governmental Agency (please list):				
□ Other (please specify):				
Indicate the estimated number of sub-awards the budget w	/ill include:			
Level of Support Requested from Development Office				
Tell us what support you will need in preparing your p	proposal (check all that apply):			
□ Consultation (planning/application	□ Proposal editing/proofing			
process) □ Grant team development	\Box Help with constructing your budget			
Proposal development				
□ Other (please specify):				

PI Signatures and Reviews

I certify that this grant/proposal meets the needs of the department, program, or unit as outlined above. For projects that require hiring staff, I will ensure that all documents pertaining to the hiring of that staff member indicate that the period of employment is effective until (I) the termination of the program or project, (2) termination, reduction, or revision of an applicable portion of the contract or project, or (3) a reduction in the program staff is necessary, or for cause, whichever occurs first. You must collect the signatures below in the order that they appear.

Applicant	Date	
Division Dean over relevant area	Date	
Comment:		

Executive Signatures and Approval

At least two (2) weeks prior to submitting your proposal, you will need to seek approval of your budget from the DACC Grants & Contracts Business Office. At that time, submit this form along with the project budget for Business Office approval and obtain the signatures below, in the order in which they appear. The NMSU System requires grants to be turned in for final review at least one (1) week prior to the grant deadline. By signing this form, the following individuals certify that the budget appears sufficient and that the impact on DACC resources is reasonable:

Chief Financial Officer	Date	
Vice President of Student Services (if applicable)	Date	
Vice President of Academic Affairs (if applicable)	Date	
Vice President of External Relations (if applicable)	Date	
DACC President	Date	