

Grants Development
Office of Financial Services
Sabal Hall, Building O

Ph: (239) 489-9227 Fax: (239) 489-9339

## **GRANT APPLICATION SUBMISSION FOR INTERNAL REVIEW**

(to accompany grant application submissions)

Principal Investigator/Project Director:					
Telephone:	Fax:		E-Mail:		
Department/Campus:					
☐ Academic Affairs ☐ Students Affairs & Enrollment ☐ Administrative Services		Research, Technology & Accountability Edison Collegiate High Schools			
Co-Investigator(s), if applicable:					
Title of Project:					
Project Period: (Start Date) (End Date)					
Sponsor/Grantor Information:					
Sponsoring Entity:					
Sponsor Type: Federal  State  Local  Private  Other					
If Private or Other, is a 501(c)3 designation required? ☐ No ☐ Yes					
Is this project a collaboration?:   No Yes If yes, please explain:					
Grant/Program Name:			CDFA #:		
Notice of Intent to Apply Required?  No Yes If yes, when?					
Submission deadline:					
Project scope: (How do you intend to use the funds?)					

PROJECT COSTS AND BUDGET JUSTIFICATION				
	<u>Amount</u>	<u>Details</u>		
Personnel	\$			
Supplies	\$			
Equipment	\$			
Travel	\$			
# of years				
Total Project Budget	\$			

The following questions help ensure that Edison is in compliance with federal and sponsor regulations and help clarify the budget. Please check the applicable box of the corresponding answer when appropriate.
1. Project will involve hiring grant-funded positions.
2. Project will involve computer services including procuring/leasing/replacing/upgrading equipment and/or software.
3. Project will require renovation or modification of current space.
4. I am debarred or suspended from doing business with the federal government.
☐ 5. Project may result in me and/or a co-investigator or family member(s) having a potential conflict of interest.
6. Project will require a portion of the work to be subcontracted.
7. This project will provide paid research/sponsorships/internships for students.

Please include the following with the submission of your application:

## **Documents**

Copy of grant or website address

Project/program summary detailing the proposed project activity, needs assessment, method of data collection, project goal(s), and description of population served.

Supplemental budget detail, if applicable

Submit completed applications to: Office of Financial Services

> **Grants Development** Fax: (239) 489-9339

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