HINDS COMMUNITY COLLEGE
PRE-PROPOSAL SHORT REQUEST FORM
FOR GRANTS $100,000 OR LESS

Please submit the completed form with the required signatures to:
Don E. Slabach, Grant Coordinator • External Funding Office
D.G. Fountain Hall, Room 205 • Raymond
Don.Slabach@hindsc.edu • Office: 601-857-3751 • Fax: 601-857-3566

1. Title of grant and funding entity:

2. Name(s) of person(s) initiating the grant proposal:

3. Name(s) of person(s) writing the grant proposal:

4. Who will manage the funded grant project?

5. Grant application due date:__________________________

6. Amount of funding sought:__________________________

7. Are matching funds required? □ Yes □ No
   If yes: cash amount: __________________________
   Identify source(s)/budget code(s) __________________________

8. Grant period: Start Date: ____________________________ End Date: ____________________________

9. In-kind support (current College personnel, facilities, equipment to be used). List all by percent of time to be spent on grant
   OR actual dollar amount.
   Personnel: ____________________________ Facilities: ____________________________
   ____________________________ ____________________________ ____________________________

10. List anticipated new personnel, facilities, and equipment required for the grant’s successful implementation:
    Personnel: ____________________________ Facilities: ____________________________
    ____________________________ ____________________________ ____________________________

11. List all community partners by organization name, contact person, type of support, and if any match is required.

12. Briefly describe the project you wish to fund and identify the Hinds CC strategic goal(s) it addresses (Attach additional paper
    if necessary):
    ____________________________ ____________________________ ____________________________

13. Will the project include human subjects or vertebrate animals requiring Internal Review Board approval? □ Yes □ No

14. Will you need assistance from the Community Relations Division (Marketing, Public Relations, External Funding Office)? □ Yes □ No
    If yes, what type of assistance is need?

   PLEASE ATTACH THE COMPLETE REQUEST FOR PROPOSAL (RFP) FOR THE GRANT

Submitted by: ____________________________________________________________
   (Signature and title) Date

Phone number: ____________________________ Email Address: ____________________________

10-14/ Pre-Proposal Under $100,000 Request/ External Funding/ Community Relations/ 14005