



**HINDS COMMUNITY COLLEGE  
PRE-PROPOSAL APPROVAL ROUTING**

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@hindsec.edu • Office: 601-857-3751 • Fax: 601-857-3566

**Date** \_\_\_\_\_

**Title of Grant** \_\_\_\_\_

**Person initiating the grant proposal** \_\_\_\_\_

**IMMEDIATE SUPERVISOR**

Date received: \_\_\_\_\_  APPROVED or  DISAPPROVED

Immediate Supervisor (Signature): \_\_\_\_\_

Comments: \_\_\_\_\_

Date Forwarded: \_\_\_\_\_

**APPROPRIATE DEAN OFFICE (If Applicable)**

Date received: \_\_\_\_\_  APPROVED or  DISAPPROVED

Dean (Signature): \_\_\_\_\_ Dean

Comments: \_\_\_\_\_

Date Forwarded: \_\_\_\_\_

**APPROPRIATE VICE PRESIDENT**

Date received: \_\_\_\_\_  APPROVED or  DISAPPROVED

Vice President (Signature): \_\_\_\_\_ Dean

Comments: \_\_\_\_\_

Date Forwarded: \_\_\_\_\_

**EXTERNAL FUNDING OFFICE, DIVISION OF COMMUNITY RELATIONS**

Date received: \_\_\_\_\_  APPROVED or  DISAPPROVED

Grants Coordinator (Signature): \_\_\_\_\_

Comments: \_\_\_\_\_

Date Forwarded: \_\_\_\_\_

**OFFICE OF THE PRESIDENT**

Date received: \_\_\_\_\_  APPROVED or  DISAPPROVED

President (Signature): \_\_\_\_\_

**ACTION/RECOMMENDATION FROM PRESIDENT:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

