



**HINDS COMMUNITY COLLEGE
PRE-PROPOSAL CONCEPT FORM
FOR GRANTS ABOVE \$100,000**

Please submit the completed form with the required signatures to:
Don Slabach, college grant writer • Fountain Hall, Room 205
Donald.Slabach@hindsc.edu • Office: 601-857-3751 • Fax: 601-857-3566

SECTION 1: GENERAL INFORMATION

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. Has a director or principal investigator been identified for this grant? If yes, identify the person and his or her current HCC position and title. _____

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: _____ _____ _____ Equipment: _____ _____ _____
--	---

10. List anticipated new personnel, facilities, and equipment required for the grant's successful implementation:

Personnel: _____ _____ _____ _____ _____	Facilities: _____ _____ _____ Equipment: _____ _____ _____
--	---

11. Is there a requirement to sustain the program after the grant ends? * Yes * No

If yes, describe the requirement and the institutional resources needed to sustain the program. Provide cost estimates of any required financial match or in-kind.

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

SECTION II: OVERVIEW OF GRANT

Please answer for following briefly yet descriptively.

1. PROPOSED PROJECT TITLE: _____

2. Purpose of project: _____

3. Which of HCC's Strategic Goals does this project address? _____

4. Why is this grant project needed? _____

5. What is the project's overall benefit to HCC? _____

6. What are the project's key objectives? _____

7. What are the projected outcomes? _____

8. Who is the targeted population? _____

9. Briefly describe the plan of operation (how the project will be achieved – who will do what, when and how).

10. What are the minimum qualifications required of key personnel to successfully achieve the project goals?

11. Briefly describe the project's evaluation component (quantitative and qualitative evaluation measures).

12. Projected Release Time for faculty (from teaching), if applicable: _____

Will you need assistance from the Community Relations Division? 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: _____