

Request for Solicitation Approval

1. Name of Person Submitting this Request: _____
2. E-mail address: _____
3. Phone: _____
4. Job Title: _____
5. Department: _____
6. Immediate Supervisor's signature: _____
7. Division Head's signature: (if other than above) _____
8. All proposals must be reviewed by the Grants Office prior to submission. Do you need additional assistance with proposal preparation? Yes _____ No _____
If so, please specify: _____
9. Working title of the project and brief description of the project: _____
10. What need, problem, or issue does your project address? _____
11. Describe your project's relevance to the college's mission, goals, and/or objectives: If funded, this grant would support the College's mission by assisting in the dual enrollment program; thus meeting our funding formula needs.
12. Does your project require additional space? Yes__ No
If Yes, please describe: _____
13. Does your project require collaboration with others? Yes__ No_____
If Yes, with whom will you collaborate? _____
14. Please complete the section below if you have identified a potential funder/donor:
 - a. Funder/Donor: _____
 - b. Maximum Grant Award (for funders): \$ _____
 - c. Amount to be requested (for donors): \$ _____
 - d. Application Due Date (for funders): _____
 - e. Does the funder/donor require a funding match? _____
 - f. If so, are in-kind donations acceptable as a funding match?
 - g. Describe your prior association with the funder/donor, if any:

_____ Approved Yes__ No__
Karen F. Nippert, Date

Note: This Request for Solicitation Approval must be approved by the Vice President of Institutional Advancement before a proposal is submitted on behalf of the college. See Southwest Policy No: 4-01-04-01-29:

http://www.southwest.tn.edu/documents/Policy_Manual/section4/4-01-04-01-29.pdf