

<b>DINÉ COLLEGE PROPOSAL CONCEPT APPROVAL FORM</b>
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<b>Brief Description of the Grant Concept &amp; Proposed Title</b>
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<b>Proposal Deadline</b>	
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<b>Matched Funds Required</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
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<b>TYPE:</b>
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<b>AMOUNT:</b>
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<b>New Personnel Required</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
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<b>TYPE AND HOW MANY:</b>
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<b>Additional Space Required</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
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<b>TYPE:</b>
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<b>Existing Personnel to be Involved:</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
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<b>Describe how and who will be involved:</b>

<b>Partners Involved</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Who and how will they be involved:</b>	

<b>Funding Source:</b>
<b>Approximate Budget Request:</b>
<b>TYPE:</b>
<b>Single Campus</b> <input type="checkbox"/> <b>Multiple Campus</b> <input type="checkbox"/>
<b>Which Campus/Center?</b>
<b>Other Important Information:</b>

**Approvals:**

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**Proposer**

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

\_\_\_\_\_  
**Division Chair**

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

\_\_\_\_\_  
**Academic Dean**

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

\_\_\_\_\_  
**Vice President of Academic & Student Programs**

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

\_\_\_\_\_  
**President**

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