



MINI-GRANT PROJECT

TITLE OF PROJECT

Submitted by:

Applicant(s)

Division/Department

Phone

Amount of Request: _____

Supervisor's Signature

Vice-President's Signature

SEND TO:
Elizabeth Townsend
Piedmont Community College Foundation
P. O. Box 1101, Roxboro, NC 27573
(336) 322-2104 Elizabeth.Townsend@piedmontcc.edu



MINI-GRANT PROJECT APPLICATION

(Please type)

Title of Project: _____

Budget Request: _____

Number of students to be served by this project: _____

Target Population: _____

Duration of Project: To Begin _____ To Be Completed _____
(Date) (Date)

Project Description Summary:

Goals and Objectives:

How this project relates to PCC's strategic plan and/or enrollment growth:

Schedule of Activities (include beginning and ending date of project):

Evaluation Process:

Detailed Budget of Project (list each item separately with cost):

Materials (Equipment, supplies, etc.)	Cost
Total	

Additional funding that has been secure (list funding amount and funding sources):