



Grant and Contract Approval Form

Return this completed form and a copy of the proposal or contract to the Grants and Special Projects Office

Sponsor Information		
Sponsor & Program:		Proposal Deadline:
Sponsor Contact:	Phone:	Email:
Request for Proposal Link/Location:		
Agency type: Federal* State* Private/Foundation:		
<i>*For Federal and State funding, attach a signed SCC Conflict of Interest Form.</i>		
C.F.D.A. # (for Federal funding opportunities only):		
Proposal Information		
Project Title:		
Project Director (or Principal Investigator):	Department:	
Co-Director (or Co-Principal Investigator(s)):	Department:	
Project Description (include a description of who benefits from the project):		
Is this a renewal or continuation of funding? Yes No		
If yes, what funding source?		
Is this a subaward? Yes No		
Are there subrecipients? Yes No		
If yes, who? Attach completed subrecipient(s) form.		
Total Grant Request/Contract Amount:	Indirect Cost Rate:	Indirect Cost Amount:
Does this project require SCC resources? Yes No		
If yes, explain (including approximate staff time, travel, equipment or supplies needed to participate or lead in the project):		
Does this project matching funds? Yes No		
Match Amount:	Department:	Unrecovered Indirect:
Match Source(s):		
College:	Cash	In-kind
North Mankato Foundation:	Cash	In-kind
Faribault Foundation:	Cash	In-kind
Third Party Contribution:	Cash	In-kind
Leveraged Amount:		
Project Start Date:	Project End Date:	

Project Highlights and Required Follow Up

If your project involves any of the below items you may be required to receive additional approvals prior to submitting the application or once awarded.

Does this project involve:

Approval Initials

1) The reallocation of space, remodeling or construction?	Yes	No	
2) Hiring personnel?	Yes	No	
3) Creation of new degree program or services?	Yes	No	
4) Research or human subjects surveyed for participation?	Yes	No	
5) Any ongoing institutional commitment past the project end date to institutionalize or maintain the project?	Yes	No	
6) Monetary costs incurred to participate in the proposed project?	Yes	No	

Once approved, please have the individual initial the approval column

Required Signatures

Project Director (or Principal Investigator) - I certify that the plan detailed in the proposal and/or contract complies with all campus, state, and federal regulations and policies and reflects college and departmental goals. This project is achievable as described, including the limitations of time, resources, and personnel. All required approvals have been satisfied. If awarded, I agree to conduct the proposed project in compliance with 1) the conditions of the grant, and 2) all federal policies and procedures and with all policies, procedures, and protocols mandated by South Central College, Minnesota State Colleges and Universities, and the State of Minnesota.

Typed Name

Signature

Date

Department Chair/Unit Director - I certify that I have reviewed the proposal and/or contract and found it to be aligned with the needs of the department and complete including required clearances, budget, and commitments involving space, faculty/staff time, and matching funds. I certify that all commitments of resources and time of the department will be fulfilled if awarded

Typed Name

Signature

Date

Director of Grants and Special Projects – I certify that to the best of my knowledge this proposal is consistent with campus, state, and federal regulations; is within the campus’s research/service mission; and is approved for submission to the funding agency.

Typed Name

Signature

Date

Vice President/Cabinet Member – I certify that this proposal and/or contract falls within the College’s mission and is beneficial to the College. I certify that all financial resources stipulated in this proposal and/or contract will be fulfilled.

Typed Name

Signature

Date

Vice President of Finance – I certify that this proposal and/or contract falls within the College’s mission and is beneficial to the College. I certify that all financial resources stipulated in this proposal and/or contract will be fulfilled.

Typed Name

Signature

Date

Submission Date: