

**Office of Sponsored Programs**  
**Grant Application Approval Form**

**Employee/Requestor:** \_\_\_\_\_ **Department/Division:** \_\_\_\_\_

Name of grantor (federal/state agency, independent foundation or corporate entity):

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RFP/Grant Opportunity Title:

Anticipated Yearly Budget:

\_\_\_\_\_

\_\_\_\_\_

Date grant application is available:

Pre-application process required? **Y or N**

\_\_\_\_\_

If yes, deadline date: \_\_\_\_\_

Grantor Contact Information:

Matching Component: **Y or N**

\_\_\_\_\_

\_\_\_\_\_

Deadline for application submission:

Length of grant life (years funded):

\_\_\_\_\_

\_\_\_\_\_

Are training workshops required to write grant?  
**Y or N** If yes....

Who will be writing the grant proposal?  
*Circle One or Both and list name(s):*

•Approximate Dates: \_\_\_\_\_

**Employee/Requestor** \_\_\_\_\_

•Costs: \_\_\_\_\_

**Consultant** \_\_\_\_\_

•Number of Attendees: \_\_\_\_\_

•MOU with estimated cost: \_\_\_\_\_

Reason for Application: \_\_\_\_\_

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**SIGNATURES REQUIRED FOR APPROVAL:**

\_\_\_\_\_  
Requestor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Immediate Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Area Vice President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Grant Compliance Officer

\_\_\_\_\_  
Date

**Please attach a summary of the proposal concept and a copy of the guidelines for this grant opportunity. Send this document and attachments to the Sponsored Programs Compliance Officer in the Dan & Andrea Boren Center, Suite 208, Office.**