



**UNIVERSITY ADVANCEMENT
APPROVAL PROCESS FOR PROJECTS REQUIRING PHILANTHROPIC FUNDING**

PROJECT TITLE:	
<input type="checkbox"/> NEW <input type="checkbox"/> SUPPLEMENT <input type="checkbox"/> RENEWAL <input type="checkbox"/> CONTRACT <input type="checkbox"/> GRANT <input type="checkbox"/> COOPERATIVE AGREEMENT	DATE PREPARED:
PROJECT DIRECTOR:	
TITLE AND DEPARTMENT:	
ADDRESS:	
EMAIL:	PHONE:

AMOUNT TO BE REQUESTED FROM PROSPECTIVE DONOR (PHILANTHROPIC PORTION): \$ _____
POTENTIAL FOUNDATION OR CORPORATE FUNDING: <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PLEASE ATTACH THE LIST OF FUNDERS):
POTENTIAL FUNDING FROM INDIVIDUAL DONOR/ALUMNI: <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PLEASE ATTACH THE LIST OF FUNDERS):
PLEASE DESCRIBE THE PLAN TO SUSTAIN FUNDING AFTER THE GRANT PERIOD ENDS: (ATTACH EXTRA PAGES WHEN NECESSARY)
IS THIS A NEW OR EXISTING PROJECT? <input type="checkbox"/> NEW <input type="checkbox"/> EXISTING
PLEASE DESCRIBE THE PROJECT: (ATTACH EXTRA PAGES WHEN NECESSARY)
HOW WILL THIS PROJECT ENABLE JOHN CARROLL UNIVERSITY TO BETTER FULFILL ITS MISSION, VISION, CORE VALUES, AND STRATEGIC PRIORITIES: (ATTACH EXTRA PAGES WHEN NECESSARY)
HOW WILL THIS PROJECT ATTRACT OR RETAIN NEW STUDENTS TO JOHN CARROLL UNIVERSITY: (ATTACH EXTRA PAGES WHEN NECESSARY)
ANNUAL BUDGET FOR THE PROJECT:

PROJECT BUDGET SUMMARY		UNIVERSITY COST SHARING		
BUDGET ITEMS	FUNDING REQUEST	AMOUNT	BUDGET SOURCE	TOTAL PROJECT COSTS
SALARY AND WAGES: FACULTY: STUDENTS: OTHER:		\$		
BENEFITS:		\$		
CONSULTANT SERVICE (NON-JCU):		\$		

TRAVEL:		\$		
EQUIPMENT AND SUPPLIES:		\$		
OTHER DIRECT COSTS:		\$		
TOTAL DIRECT COSTS:		\$		
INDIRECT COSTS (% OF SALARY/WAGES):		\$		
TOTAL COSTS		\$		

APPROVALS

PROJECT DIRECTOR: APPROVAL GIVEN REPRESENTS THAT THE PROJECT IS CONSISTENT WITH THE PROGRAM OBJECTIVES OF THIS DEPARTMENT, DIVISION, AND COMMITMENTS TO THIS PROJECT ARE ACCEPTABLE.

SIGNATURE DATE

DEPARTMENT CHAIR /SUPERVISOR: APPROVAL GIVEN REPRESENTS THAT THE PROJECT IS CONSISTENT WITH THE PROGRAM OBJECTIVES OF THIS DEPARTMENT, DIVISION, AND COMMITMENTS TO THIS PROJECT ARE ACCEPTABLE.

SIGNATURE DATE

DEAN: APPROVAL GIVEN REPRESENTS THAT THE PROJECT IS CONSISTENT WITH THE PROGRAM OBJECTIVES OF THIS DEPARTMENT, DIVISION, AND COMMITMENTS TO THIS PROJECT ARE ACCEPTABLE.

SIGNATURE DATE

VICE PRESIDENT OF PROJECT DIRECTOR'S DIVISION (IF NOT ACADEMIC VP): APPROVAL GIVEN REPRESENTS THAT THE PROJECT IS CONSISTENT WITH THE PROGRAM OBJECTIVES OF THIS DIVISION AND COMMITMENTS TO THIS PROJECT ARE ACCEPTABLE.

SIGNATURE DATE

SPONSORED RESEARCH OFFICIAL (WHEN APPROPRIATE): APPROVAL GIVEN REPRESENTS THAT THE BUDGET IS IN AGREEMENT WITH UNIVERSITY POLICY AND THAT COMPLIANCE REQUIREMENTS CAN BE MET.

SIGNATURE DATE

ACADEMIC VICE PRESIDENT: APPROVAL GIVEN INDICATES THAT THE PROJECT IS AN ACADEMIC PRIORITY.

SIGNATURE DATE

UNIVERSITY ADVANCEMENT VICE PRESIDENT: APPROVAL GIVEN REPRESENTS CLEARANCE TO APPROACH/SUBMIT TO FOUNDATIONS/CORPORATIONS AND/OR INDIVIDUAL DONORS (BUT ONLY THOSE LISTED ABOVE).

SIGNATURE DATE

PRESIDENT (IF REQUESTED BY UNIVERSITY ADVANCEMENT VP):

SIGNATURE DATE