



GRANT FEASIBILITY

Purpose: The Grant Feasibility form must be completed for all grants over \$5,000 (*excluding TRIO*) so KCC resources may be allocated for projects aligned with our strategic goals.

Process: Send the completed form to Dr. Purva Rushi, Director of Institutional Research and Grants Development, at prushi@kcc.edu at least 60 days before grant submission deadline. You will be notified of the Grant Committee's decision no later than 45 days before the grant deadline. *Contact Dr. Rushi in advance with any exceptions requested of this timeline.*

| CONTACT INFORMATION | |
|---------------------|---------------|
| Your Name: | Office Phone: |
| Department: | Email: |

| PROJECT INFORMATION | |
|--|---|
| Project title | |
| Grant funding source | |
| Submission deadline | |
| Requested grant amount | |
| KCC matching funds required? | <div style="display: flex; justify-content: space-around;"> No Yes </div> If yes, provide amount: |
| Grant award period | |
| Grant renewal? | <div style="display: flex; justify-content: space-around;"> No Yes </div> |
| Project partners <i>internal and external</i> | |
| Proposed KCC project leader | |
| Which KCC strategic goal(s) will this project support? For more information, see KCC's Strategic Goals and Measures | <input type="checkbox"/> Create a culture of completion <input type="checkbox"/> Promote an environment of excellence and innovation <input type="checkbox"/> Develop career pathways in targeted industries <input type="checkbox"/> Take a convening leadership role to strengthen and sustain community partnerships <input type="checkbox"/> Redesign foundational coursework |
| Project goals and objectives | |

| PROJECT INFORMATION | |
|--|--|
| Project summary (1 page or less) <i>include number to be served</i> | |

| PROJECT BUDGET | |
|---|---|
| New resources needed for this project and covered by the grant | <input type="checkbox"/> Technology (computers, smartboards, etc) <input type="checkbox"/> Staff (administrative assistants, coordinators, etc) <input type="checkbox"/> Equipment <input type="checkbox"/> New or repurposed space (new offices, classrooms, etc) <input type="checkbox"/> Other resources (please describe): |
| Current KCC resources needed for this project <i>include in-kind contributions</i> | <input type="checkbox"/> Technology (computers, smartboards, etc) <input type="checkbox"/> Staff (administrative assistants, coordinators, etc) <input type="checkbox"/> Equipment <input type="checkbox"/> New or repurposed space (new offices, classrooms, etc) <input type="checkbox"/> Services (research, transportation, supplies, etc) <input type="checkbox"/> Other resources (please describe): |
| How will the project be sustained after the grant period has expired? | |

If available, please attach the proposed budget.

| GRANT SUPPORT | |
|-------------------------|-----------|
| Title | Signature |
| Direct supervisor title | |
| Cabinet leader title | |