

**STATE CENTER COMMUNITY COLLEGE DISTRICT
GRANTS OFFICE**

NOTICE OF INTEREST TO APPLY FOR FUNDING

DEPARTMENT:_____ **CAMPUS:**_____

GRANT INITIATOR:_____ **E-MAIL:**_____

GRANT SOURCE:_____

GRANT TITLE:_____

APPLICATION DUE:_____ **GRANT PERIOD:**_____ **TO** _____

GRANT AWARD RANGE:_____

MATCH REQUIRED? _____ **YES** _____ **NO**

NEW PERSONNEL REQUIRED? _____ **YES** _____ **NO**

NEW SPACE REQUIRED? _____ **YES** _____ **NO**

**NEED ADDRESSED/CAMPUS FOCUS
AREA:**

**PROJECT GOALS AND
OBJECTIVES:**