

**LOS RIOS COMMUNITY COLLEGE DISTRICT
GRANT SUBMISSION & ACCEPTANCE FORM**

(Instructions provided here (hyperlink to general drive?))

Grants Office Use Only

Date Received Part I & II:

Date Received Part III:

District File Number: #

PART I: GENERAL INFORMATION					
Complete Part I and II for grant submission. Complete Part III when the project is funded and grant/contract acceptance is requested. Submit the complete signed form for submission or acceptance to the Grants Office. Questions? Call the Grants Office at 3044 or 3096.					
College/Unit		Proposal Type		Funding Agency Type	
Grant Program Name			RFA/RFP/CFDA #		
Project Title			Funder Name		
Project Director			Responsible Administrator		
Is this a sub-award from another institution	Yes	No	If yes, please state the institution:		
PART II: GRANT PROPOSAL SUBMISSION <i>Attach: Proposal, Budget, RFA/RFP (if requested by Grant Accounting)</i>			PART III: GRANT ACCEPTANCE <i>Attach: Award notification, Budget (if revised from submission)</i>		
Submission Deadline:			Was the grant awarded: Yes No		
Submission method: Delivery of Proposal:			Return Deadline: Submission method: Delivery by:		
Submit Application To: (Provide Contact Name and Details)			Return Approved Award Notice To: (Provide Contact Person & Address)		
Amount Requested: Direct Costs: \$ Indirect Costs: \$ Total Costs: \$	Period of Request: One Year Other (specify): Indirect Cost Rate (%):		Award Amount: Total Amount (if multi-year): \$ Amount of current award: \$		
Match Required:	Yes	Cash	Attach revised budget if different from amount requested in Part II		
	No	In-Kind	Have you attached revised budget? Yes No		
If Cash, Specify source and amount:					
Project Start Date:	Project End Date:		Project Start Date:		Project End Date:
Approval: ROUTE VIA EMAIL. DO NOT SIGN			Approval: ROUTE VIA EMAIL. DO NOT SIGN		
N/A			N/A		
N/A			N/A		
N/A			N/A		
(Fiscal Review Contact):					
Grants Management Use Only - Distribution			Fiscal Services Use Only - Distribution		
Fiscal Copy Sent To : _____ Date: _____			College Copy Sent To: _____ Date: _____		
College Copy Sent To: _____ Date: _____			LRCF Copy Sent To: _____ Date: _____		
Comments:			Comments:		