

GRANT PROPOSAL NOTIFICATION FORM

Date: _____

Applicants Name: _____

Name of RFP Program: _____

New Program: _____ Renewal: _____

Funding Source: _____

Release Date: _____ Submission Due Date: _____

Attach a brief overview of the funding program.

List Team Members:

Name	Department	Phone/Email
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Name	Department	Phone/Email
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Name	Department	Phone/Email
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Required Signatures:

Department Chair/Director: _____

Dean (if applicable): _____

Vice President of Academic Affairs: _____

Research Foundation Operations Manager: _____

Submit completed form to: Office of Research and Sponsored Programs at blackmonr@canton.edu or fassingerj@canton.edu.