



PimaCountyCommunityCollegeDistrict

PROPOSAL TRANSMITTAL FORM (PTF)

This form is intended for use with PCC only and should be attached to the front of the grant proposal.

Grantor or Sponsor: _____
Program Officer: _____ Phone: _____
Address: _____

Proposal Type: []New []Continuation []Renewal []Supplement []Sub-recipient []Re-submittal []Coop. Agrmnt.

Proposal Title: _____
Brief Description: _____

Project Begin Date: ___/___/___ Project End Date: ___/___/___
Project Director/Manager: _____ Ext. _____
Job Title: _____ E-mail: _____

Assurances on Program Concept Approved? [] N/A [] Yes, please attach approved Program Concept Form

Signed Letters of Support from partners attached? [] N/A [] Yes, please attach signed letter(s) on letterhead

Funds Requested for INITIAL BUDGET PERIOD
Direct Costs \$ _____ Indirect Costs (IDC) \$ _____ Total Cost \$ _____
IDC calculated at ___% of: [] Modified Total Direct Cost [] Total Direct Cost
Matching Funds \$ _____ Fund# _____ Org# _____ Prog# _____
Other College Contribution \$ _____ Source Description: _____
[] In-kind Description: _____
Institutionalization Funds: [] Required or [] Promised: \$ _____ [] Not applicable

Funds Requested for ALL BUDGET PERIODS
(Complete only when more than one budget period is involved):
Direct Costs \$ _____ Indirect Costs (IDC) \$ _____ TOTAL COST \$ _____

APPROVALS

I have reviewed the attached proposal and believe it to be compatible with the goals of PCC. I have approved reassigned time, if it was requested in the proposal, as specified in the proposed budget and will be approved if the grant/contract is awarded. Cash match and in-kind match, if specified in the budget, will be provided from existing campus resources. Suitably equipped space will be provided to the project within the campus existing facility and budget allocation, if requested in the proposal. The cash match if specified in this proposal, is a formal commitment to be charged against my budget in the appropriate fiscal year. I agree to administer this project in accordance with College policies as well as within conditions imposed by the funder.

Campus VP/Designee or District AVC _____ Date _____ Campus President or District VC/EVC _____ Date _____

I have reviewed the attached proposal and believe it to be consistent with the policies of the College and the guidelines of the funder.

Imelda V. Cuyugan, MPA
Executive Director,
Grants One-Stop Center

Raul Ramirez, EdD
Vice Chancellor
Community Relations and Institutional Outreach

Roy Flores, PhD
Chancellor

Date