



**Educational Improvement &  
Professional Development  
Grant Application  
2009**

**Application Deadline: October 30, 2009**

Lansing Community College Foundation

# EMPLOYEE DEVELOPMENT FUND

## Educational Improvement and Professional Development Grants

### Purpose of the Grant

The Lansing Community College Foundation Employee Development Fund provides funding for Educational Improvement and Professional Development Grants. These grants are established to encourage professional development through the following:

- stimulate faculty and staff involvement in new and/or innovative educational or service projects
- increase or expand the employees professional development goals
- provide funding for projects that benefit both Lansing Community College and the employee

### Eligibility

All currently employed LCC employees who have been **members of the EDF for at least six (6) months** are eligible to apply. Employees interested in joining EDF or those that have questions regarding current EDF member status should contact the Foundation Office at **483-1985**.

Application Guidelines (For assistance or information, please contact the Foundation Office at 483-1985)

1. All applicants are required to:
  - a) submit typed proposals on LCC Foundation Grant Application forms;
  - b) attach a description or explanation of the project;
  - c) attach a budget with a timeline for project completion; and
  - d) obtain required signatures, including documented support from Dean/VP (Applicants may also submit letters of project support.)
  - e) attach supportive documentation or information about the activity
  - f) agree to report on the grant use at a EDF committee meeting or at an EDF promotional event.
2. The maximum grant for a single project is \$1,500.00; however, due to limited funding, this committee may be only be able to fund a portion of your registration, travel or other fees.
3. The grant **does not** cover:
  - a) employee wages for the requested project.
  - b) fees for advanced degrees
  - c) non-EDF members
4. **Applications must be received by October 30, 2009.** Awards will be announced no later than November **30, 2009**. It is the employee's responsibility to obtain the required signatures and see that the completed application is in the Foundation office by the deadline. No exceptions to the deadline will be allowed.
5. Priority will be given to applicants who have not received a grant in the last 24 months.
6. A grant reporting form must be completed for your project within three months of the completion of your project. We do ask that grant recipients shall speak at an EDF promotional event or EDF Committee meeting about their project.
7. Grant requests are reviewed and selected by the Employee Development Fund Committee. The Committee will be looking for unique and innovative projects, that clearly help provide new or improved programs/services for LCC students/customers. Requests should clearly reflect that the applicant is unable to obtain funding through normal channels such as departmental budgets.

8. Grants are good for 12 months from award date. Unexpended grant funds will revert to the Foundation if the Project is not completed, and paperwork has not been submitted within 12 months of award.

9. The grant funding shall be limited to the purpose that the award was intended. The EDF committee must pre-approve any changes to the original grant request. Contact the Foundation Office at 517-483-1985.

## **PROGRAM CRITERIA**

*Please answer the following four questions on a separate sheet and attach to your proposal*

- 1) Briefly summarize the proposal including each of the following:
  - Program Objectives
  - Method for accomplishing the objectives
  - Timelines
  - Outcomes
  
- 2) Explain the project benefits. Include the following items in your explanation:
  - does the project enhance or expand professional development goals?
  - is the project new and/or innovative?
  - does the project benefit you and the college community?
  
- 3) Amount of requested grant:
  - If the amount of the requested grant is not the full amount needed to fund your request, please indicate how you plan to raise the balance of needed funds.
  - Attach an itemized budget for your proposal and supportive documentation (e.g. announcement, program, etc.)
  
- 4) Describe in detail the anticipated impact or outcome of the project as it relates to its relevance to the college community.
  
- 5) Describe how you would share the information gained from the project with the campus community.

For assistance or information, please contact the Foundation Office at the address below or call (517) 483-1985.

### **Send the application and supporting documents to:**

8021-Lansing Community College Foundation  
Attn: Employee Development Fund  
PO Box 40010  
Lansing MI 48901-7210

# Lansing Community College Foundation

EMPLOYEE DEVELOPMENT FUND  
Educational Improvement and Professional Development Grants

## GRANT APPLICATION

Applicant Information:

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

LCC Mail Code \_\_\_\_\_

Phone Number(s) \_\_\_\_\_  
(Home) (Work)

Email Address \_\_\_\_\_

How long have you been an EDF Member? Six months or more \_\_\_\_\_ Less than six months \_\_\_\_\_

Department/Position at LCC \_\_\_\_\_

Have you received EDF grants in the past? If so, when \_\_\_\_\_ and for what \_\_\_\_\_  
\_\_\_\_\_.

Amount of Grant request \$ \_\_\_\_\_

**Application must have required signatures and clear explanations to be considered by the Employee Development Fund Committee.**

<i>Signature(s) of Applicant(s)</i>	Title	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

Add additional sheets if necessary

**(All members of a group applying for a grant must be members of EDF at least 6 months at the time of grant application)**

Revised 9/28/2009

**Department Chair/Director:** \_\_\_\_\_

Name

Title

Do you support this request? Yes \_\_\_ No \_\_\_ Please explain:

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Please explain the value of this proposed grant to the Department or Division:

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**Signature of Department Chair/Director:** \_\_\_\_\_ **Date** \_\_\_\_\_

**VP/Dean:** Do you support this request? Yes or No Please explain:

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Please explain the value of this proposed grant to the Department and/or Division

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**Signature of VP/Dean:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note: Applications without requested signatures will be automatically disqualified.**