# Application for Diversity and Inclusion Grants

*Please fill out this form electronically and return it to Helena Hill in the Office of Institutional Equity at hlhill@salisbury.edu or to Holloway Hall 100 along with your supplemental submission. Fields marked with an asterisk (\*) are required. For additional information, please visit www.salisbury.edu/equity/grantprogram/.*

Applicant name:*

Campus e-mail:*                                                                 ID#:*

Organization, if applicable:

Applicant role:*          Faculty          Student          Staff

*If faculty or staff:*

Department:                                        Title:

*If student:*

Field of study:

Year:          First year          Sophomore          Junior

Senior          Graduate

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Project type:*          Research activity

Campus education program

Conference/seminar presentation

Conference/seminar attendance

Creative production (art, dance, literature, music, theater, etc.)

Other

Target area(s):*          Recruitment

Retention

Campus climate

Project title:*

Amount requested:*

Have you or your organization previously received financial support from the OIE?*          Yes          If so, most recent date:

No

Has your project been approved by IRB? *          Yes          No

Pending          N/A

For additional information on the IRB approval process and whether a research project requires IRB approval, please visit http://www.salisbury.edu/gsr/research/compliance/irb/.

# Project Description

Please address the following components in the order listed on separate sheets of paper. Please keep your supplemental submission to 5 pages, and check off items addressed below:

Project title*

Narrative description of the proposed initiative*

Annotated list of key individuals and their roles in the project*

Narrative description of project budget, including overview of detailed project budget below*

Schedule of deliverables*

How the program/initiative will positively impact the University community, particularly as it relates to diversity and inclusion and the University's strategic plan*

If applicable, methods in which the program/initiative will be sustained beyond the Diversity and Inclusion Grant period

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# Detailed Project Budget

Please fill out all fields. If there is no expense associated with a specific budget area, please indicate so with $0.00.

## Expenses

Supplies/materials/equipment:*                Registration fees:*

Stipends/wages/honoraria:*                    Are there travel-      Yes
                                              related expenses?*
                                                                     No

*Please detail travel-related expenses, if any:*

Transportation:                               Lodging:

Meals:                                        Other:

Other expenses:*                              *(Please describe in narrative)*

**Total expenses**:*

## Support from other sources

Department:*        Yes        No              Amount:

Dean/Director:*     Yes        No              Amount:

Other internal:*    Yes        No              Amount:

Other external:*    Yes        No              Amount:

**Total other support**:*

**Amount requested:**