GAME CHANGER GRANTS

GRANT APPLICATION

| Name: |
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| |
| Team Members: |
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| |
| Project Title: |
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| What is the problem you are trying to solve? |
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| |
| Description of Project: |
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GAME CHANGER GRANTS

GRANT APPLICATION

In the provided area, please describe how your project relates to each <u>OTC</u> <u>Cares Pillar</u>:

Pillar Solution Student-Centered How will your project affect our students? Data-Informed How did data **Proactive** How will this project provide help to students before they seek it? Holistic How will this project meet student needs, not just those expressed?







GRANT APPLICATION

| Which commitment outlined in the Strategic Plan, does the project align with? |
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| □ Student Engagement |
| ☐ Local Communities |
| □ Institutional Excellence |
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| How will the project support the Strategic Plan commitment? |
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| What makes this project innovative? |
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GRANT APPLICATION

Budget:

| Amount | Description | Total | |
|--------|-------------|-------|--|
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| | | | |
| | | | |
| · | Total | | |
| | Amount | | |

| Will this project continue after the grant funds have been spent? If so, how project be funded? | will the |
|---|----------|
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