## Office of Equity, Diversity and Inclusion Inclusive Excellence Proposal Form

Please complete all fields, sign and return to the Office of Inclusive Excellence. You may submit the completed form using the submit button located at the end of the form. Only completed forms will be reviewed. You will be notified of the outcome, via email. Thank you.

Please indicate the type of funding you are seeking.	
O Professional Development (Faculty, Staff, Student)	
O Recruiting / Hiring	
Student Organization	
Affinity Group	
O Community	
Project Title	
Name	

Title	
Department	•
Email	-
College/Community Division	_
Phone	_
PROJECT INFORMATION	
Briefly describe the project, goals and objectives, time line and key personnel. Describe the project connects to the Inclusive Excellence Initiative's Guiding Principles.	escribe how

## PROJECT IMPACT

Briefly describe the anticipated project impact and give a preliminary estimate of individuals will benefit. Also, describe the project's sustainability (if applicable).	how many
	-
PROJECT COSTS	
Please specify total amount requested	