**GRANT APPLICATION**

***Applicant Information^***

Institution Name:

Institution Address:

**Name and Title of Chief Officers of the Institution (attach additional page as necessary)**

Name:

Title:

Phone Number: Email Address:

Name:

Title:

Phone Number:

Phone Number: Email Address:

Name:

Title:

Phone Number: Email Address:

**Brief Title of Applicant’s Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name and Contact Information for Program Matters involving this Application**

Name:

Title:

Phone Number:

Email Address:

In order to complete the application, please provide a general description of the program, project, or

use for which grant funding is requested and other documents as necessary to show the general character of the project proposed with this application. Cost estimates in a budget of proposed expenditures are also required. These additional details may be provided on other forms prescribed by the Board. A complete application consists of the application, project plan and budget. If approved, a written grant agreement will be proposed by the Board.

\* Public Act 102-0626 exempts certain state funded grants awarded to public institutions of higher education from the Grant Accountability and Transparency Act.

^ Per Grant Funds Recovery Act, 30 ILCS 705/4