



## Mini Grant Application

Put Your Passion to Work  
Faculty Request for Lake Erie College Entrepreneurship Initiative

Congratulations.

You are about to begin a journey that will put your passion to work. The Lake Erie College Faculty Mini Grant Application Request for Lake Erie College, Center of Entrepreneurship is part of the overall campus experience to award a number of annual grants in the amounts specified in the Mini Grant category to those faculty members who engage in entrepreneurial course development, Round Table Q & A, On-Site Corporate Visits or as a Team Leader in the *CAMPUS WIDE I-ACTIVATE APPLICATION DEVELOPMENT CONTEST* initiative.

Included in your packet are the following:

- Cover Sheet
- Instructions & Guidelines
- Proposal Form
- Funding Rubric

Please send your completed proposal to:

Lake Erie College, Mini Grant Initiative  
Center for Entrepreneurship  
Box M32

# LAKE ERIE

## COLLEGE CENTER FOR ENTREPRENEURSHIP

### Center for Entrepreneurship Mini Grant Application

Faculty Request for Lake Erie College Entrepreneurship Initiative

Proposal Title: \_\_\_\_\_

Mini Grant Type: \_\_\_\_\_

Department \_\_\_\_\_

Project start date \_\_\_\_\_ End date \_\_\_\_\_

Project Milestones:

Project description:

Assistance Requested:

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chair / Dean Signature

\_\_\_\_\_  
Date

Office use only:

Proposal Number \_\_\_\_\_

Committee review date: \_\_\_\_\_

Fund  Fund with conditions Amount: \_\_\_\_\_

## **Innovate, Activate, and Collaborate to bring Entrepreneurship to your Learning Community**

### **Proposal Form – Faculty Request for LEC Entrepreneurship Mini Grant Funding**

#### **Instructions & Guidelines**

- 1) Funding requests should relate to proposals for one of the four Mini Grants, 1 - Entrepreneurial Curriculum Course Development, 2 - Round Table Q & A, 3 - On-Site Corporate Visits, or 4 – as a Team Leader in the LEC Campus Wide I-Activate Application development Contest. ***ANY OTHER TYPE OF GRANT REQUEST SHOULD USE THE STANDARD FACULTY/STAFF GRANT REQUEST FORM.***
- 2) All funding requests for Entrepreneurial Curriculum Course Development must include a copy of the existing course syllabus and a new course syllabus indicating the changes.
- 3) To apply for funding, faculty/staff should complete the *Proposal Form* below in its entirety. Appendices, project plans and other documentation in support of the proposal may be included.
- 4) Proposals will be accepted at any time throughout the academic year, but will be evaluated, reviewed, approved or denied on a six week cycle.
- 5) Proposals will be reviewed by the review committee which is chaired by the VP of Academic Affairs, Director of the Center for Entrepreneurship, one Center for Entrepreneurship Executive-in-Residence and two Center for Entrepreneurship Entrepreneurs-in-Residence. A formal presentation or meeting with the review committee is not required, but may be requested by the committee or the requestor, if it is deemed needed to answer any questions raised during the review process.
- 6) Recipients of funding shall within 10 days of the announcement of the funded activity, review and sign the Faculty Grant Terms, documenting the specific expectations related to the faculty grant award.
- 7) Completed *Proposal Forms* should be submitted to the Director of the Lake Erie College Center for Entrepreneurship.

***NOTE: Grant funds will NOT to be used for any of the following;***

- a. Capital Equipment purchases and/or leases, unless previously approved,***
- b. Building/Room renovations,***
- c. Use for non Lake Erie College curriculum or student enhancement,***
- d. Domestic and International Travel unless previously approved,***



### **Proposal Form**

Name:  
Title:  
Department/Division:  
College telephone number:  
College email address:  
Date:

- 1) Please identify which Mini Grant for which funding is being requested.  
(1 - Entrepreneurial Curriculum Course Development, 2 - Round Table Q & A, 3 - On-Site Corporate Visits, or 4 – as a Team Leader in the LEC Campus Wide I-Activate Application development Contest)
  
- 2) Please provide a timetable for the completion of the proposed activity. Where applicable, please list interim milestones along with projected dates for the accomplishment of such milestones.
  
- 3) Please list the type of assistance, other than financial, you will need to integrate the Mini Grant into your curriculum or learning community.

**LAKE ERIE COLLEGE**  
CENTER FOR ENTREPRENEURSHIP

**Faculty Mini Grant Review Checklist**

Proposal # \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

Please review the grant application and complete the following:

- |                              |                             |                                                                                        |
|------------------------------|-----------------------------|----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Applicant presented a clear description of the project.                                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Applicant presented a project timeline with beginning and ending dates and milestones. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Applicant included outcome measures to assess impact of the project.                   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Applicant included a budget.                                                           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | Signed Agreement Statement included in packet.                                         |

Committee Comments:

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- Accept                       Accept with modification(s) noted                       Reject

Reason for Rejection: \_\_\_\_\_

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- Yes                       No      Recommend progress report based on milestones within the proposal.

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Reviewer signature

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Date

**L A K E E R I E C O L L E G E**  
CENTER FOR ENTREPRENEURSHIP

If you should have any questions related to this faculty mini grant application, do not hesitate to contact our offices.

Congratulations.

\_\_\_\_\_  
Executive Director, Center for Entrepreneurship

\_\_\_\_\_  
Date

\_\_\_\_\_  
VP Chief Academic Officer , Lake Erie College

\_\_\_\_\_  
Date

Enclosed are two originals of this mini grant document. Please sign both originals and retain one for your records. Return a set of signed originals to Program Coordinator, Center for Entrepreneurship in the enclosed envelope.

The foregoing conditions are hereby accepted and agreed to as of the date indicated.

By: \_\_\_\_\_  
Signature of faculty member

\_\_\_\_\_  
Academic Department

Date: \_\_\_\_\_

Effective: October 1, 2010

**EXHIBIT A**

**FACULTY GRANT PROGRESS REPORT**

1. Please provide a brief summary of the activities completed so far regarding project. Include significant milestones, successes and concerns.

2. Suggestions for ways the Center for Entrepreneurship may better support your efforts.

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Signature

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Date

EFFECTIVE: October 1, 2010