

## **GRANT GUIDELINES**

### FLORIDA POLY PARENT NETWORK

The *Parent Network* strives to enrich the college experience for undergraduate students at *Florida Poly*. The *Parent Network* has created the Grants Program in an effort to assist with funding challenges or opportunities for departments, divisions and student organizations at Florida Polytechnic University

If you have questions regarding the grant process, please contact the Office of Parent Giving at parentnetwork@floridapoly.edu.

- Applications will only be accepted from *Florida Poly* departments, divisions or registerd student organizations registered with the Student Government Association and who demonstrate a direct and positive impact on student life at *Florida Poly*.
- All applicants must ensure their funding requests are supported by their Faculty Advisor and Vice Provost as applicable.
- The grant applications provided by the *Parent Network* should be thoroughly completed and applicants should be prepared to provide additional information to the Office of Parent Giving if requested.
- All applicants must provide financial information to receive their grant award. Any application submitted without this information will not be considered for funding. Please provide the following:
  - The Academic program/Organization/ or Division cost center associated with the club, program, or initiative that will manage any
    awarded funds.
    - o Approval from the Faculty Advisor or Dept. Director and Vice Provost (when applicable)
  - If a cost center is not available and funds are unable to be transferred a quote will be accepted:
    - o The Foundation will pay the invoice generated from a quote directly after upon grant approval, for the approved amount.
- Grants are not guaranteed and are subject to available funding each year.
- Recipients are asked to include the Florida Poly Parent Network logo on promotional materials, advertisements, or websites, if possible.
- Applications for grant monies to fund the purchase of promotional items (t-shirts, cups, pens, etc.), group transportation, and other non-essential "wish list" items are discouraged, except where the item in question is a vital and demonstrated function of the program (i.e. t-shirt is the actual uniform for a group).
- Grant awards may also not be used to fund new endowments, assistantships, employee salaries, or to satisfy prior debts or invoices, for goods or services purchased prior to this application.
- Grant Applications will be reviewed by the *Office of Parent Giving* in February 2025, and you will receive notification by March 2025 if awarded or not. Funds will be disbursed in April 2025, it is expected that the grant funds will be spent in the 2025-2026 school year.
- All funds awarded must be spent within a full calendar year of their grant application approval.
- Grant recipients are asked to submit an impact report within one year of receiving the award. Send us an email detailing how you spend the funds or any thank you notes you all may have for the *Parent Network*.



| Project / Program Title:   |                    |
|--|--------------------|
| Department, Club or RSO:   |                    |
| Contact Person(s): (Please list any additional contacts at the bot   | tom of this page)  |
| Name:  | Title:             |
| Email:   | Phone:             |
| Name:  | Title:             |
| Email:   | Phone:             |
| If Student Organization, are you currently registered with the Source of Florida Poly Faculty/Staff, is this grant request a funding prior |                    |
| Please list approving Vice Provost/Director (REQUIRED):  |                    |
| Please provide one of the following (REQUIRED):  Cost Center/Department (used for fund transfer):  |                    |
| Quote # for reference (to receive a check/Foundation direct p  | ayment):           |
| Project Description - Include Program Goals & Objectives (20   | 00 words or less): |



# **GRANT APPLICATION**

What are the undergraduate student needs being addressed? Why are Parent Network grant funds needed? (400 words or less):

| Amount Requested:              |                       |                                    |  |  |
|--------------------------------|-----------------------|------------------------------------|--|--|
| Estimated # of Florida I       | Poly Students Served: |                                    |  |  |
| % of Total Budget:             |                       |                                    |  |  |
| *PRIOR FUNDING – PAST 5 YEARS* |                       |                                    |  |  |
| YEAR                           | AMOUNT USED/REQUESTED | AMOUNT SPENT/AWARDED (and by whom) |  |  |
|                                |                       |                                    |  |  |
|                                |                       |                                    |  |  |
|                                |                       |                                    |  |  |
|                                |                       |                                    |  |  |



## **GRANT APPLICATION**

\* If received prior funding, please include the dates, amounts, and a summary of how the grant monies were used and the specific impact this funding had on your program. (200 words or less)

| PROPOSED PROGRAM BUDGET DETAIL (REQUIRED) |                    |                                 |                  |  |  |
|---|--------------------|---------------------------------|------------------|--|--|
| BUDGET ITEMS                              | FUNDS REQUESTED \$ | CURRENT/<br>EXISTING FUNDING \$ | TOTAL FUNDING \$ |  |  |
|   |                    |                                 |                  |  |  |
|   |                    |                                 |                  |  |  |
|   |                    |                                 |                  |  |  |
|   |                    |                                 |                  |  |  |
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|   |                    |                                 |                  |  |  |
|   |                    |                                 |                  |  |  |
|   |                    |                                 |                  |  |  |
|   |                    |                                 |                  |  |  |
| TOTALS                                    | Network REQUEST \$ | OTHER TOTAL \$                  | TOTAL BUDGET \$  |  |  |

Please Submit your completed Application to parentnetwork@floridapoly.edu

OPTIONAL: Send up to 3 examples of past grant funding impact (surveys, high-resolution pictures, or quotes) to parentnetwork@floridapoly.edu