Student Success Equity Council

REQUEST FOR FUNDING FORM

Primary Contact Person(s): Laurel Anderson Ext.:

Program/Workgroup/Department(s):

List of Partners/Participants: (please list name and program/workgroup/department)

Name	Program	Workgroup	Department

1. Project Title:

2 Brief Description of proposed project and issue(s) you plan to address (not to exceed 250 words):

3. Identify the proposed target "disproportionate impact" group(s) to be impacted:

Success Indicator	Disproportionate Impact	Target	3-year Goal
Access	Veterans	☐	+5% Enrollment
Course Completion	Foster Youth	☐	+5% Successful Completion
ESL & Basic Skills Completion	African Americans	☐	+5% Successful Completion
ESL & Basic Skills Completion	Hispanics	☐	+5% Successful Completion
ESL & Basic Skills Completion	Males	☐	+5% Successful Completion
ESL & Basic Skills Completion	Students w/Disabilities	☐	+2% Basic Skills Seq. Comp.
Degree & Cert. Completion	African Americans	☐	+2% Degree Completion
Degree & Cert. Completion	Students w/Disabilities	☐	+2% Completlon
Degree & Cert. Completion	Unprepared Age 25-49	☐	+2% Completlon
Transfer to 4-year Inst.	Unprepared Age 25-49	☐	+2% Completlon

Student Success Equity Council

REQUEST FOR FUNDING FORM

4. Identify the specific goals/activities from SE Plan that you will address:
http://www2.palomar.edu/pages/ssec/files/2016/02/PalomarCollege_Student_Equity_Plan_2015-16_FINAL_wSignatures.pdf

5. Describe your proposed intervention strategies/activities:

6. Describe your implementation timeline:

7. Reference and explain the research studies that support your proposed intervention(s):

8. Describe your anticipated outcome(s):

9. Describe how you plan to evaluate progress toward these outcome(s):

10. Identify the evaluation support you anticipate needing from the Institutional Research Office:

11. Excluding SE and SSSP, identify the available funding resources (sources and amounts) that you will have access to:

Funding Requested from Student Equity:

☐ I have read the Acceptable and Unacceptable Uses of Student Equity Funds for Fiscal Year 2016 – 2017.

Budget Category	Item Description	Quantity Needed	Total Amount
1. Staff Identify pay rate/ hours/benefits (link to Fiscal Services benefits worksheet below): http://www.palomar.edu/fiscal_services/LeftNav/Forms.html			$ 0.00
Hourly Employees			$ 0.00
Classified Staff			$ 0.00
Faculty			$ 0.00
Consultants			$ 0.00
2. Supplies/Materials			$ 0.00
3. Equipment			$ 0.00
4. Services			$ 0.00
5. Printing			$ 0.00
6. Mailing			$ 0.00
7. Travel			$ 0.00
8. Food			$ 0.00
9. Facilities Needed			$ 0.00
10. Other			$ 0.00

Total Cost of Project: $ 0.00

Print Reset Submit