# ASSESSMENT PROJECT GRANTS APPLICATION

1. Review the Guidelines for Assessment Project Grants document at <https://www.atu.edu/assessment/grants.php>.
2. Complete and submit this application.

|  |  |
| --- | --- |
| Project Title | Date |
|  |  |

|  |  |  |
| --- | --- | --- |
| Name of Applicant(s) | Department | e-mail |
| 1.  |  |  |
| 2.  |  |  |
| 3. |  |  |

**Project Summary**

**Objectives and Outcomes**

Describe the objectives and measurable outcomes of the proposed project or expectations of knowledge to be gained at a conference.

**Assessment Methods**

Describe the assessment methods to be incorporated into the proposed project. These may include capstone projects, papers, portfolios, surveys, interviews, focus groups, or other measures. For additional ideas and brainstorming, [contact the UAA office](https://www.atu.edu/assessment/contact.php).

**Enhancing Student Learning Assessment**

Explain how the project findings or conference experience will be used for the improvement of student learning assessment.

### Repeated request

Has this department or program received funds from a previous assessment grant? If so, describe, in detail, how the results from previous projects have been used to enhance student learning.

### Detailed Budget

Provide a detailed budget using the table below. Please note the following stipulations:

* **Travel**: Requests must be directly related to the grant proposal. This may include travel to and/or participation in a conference focusing on assessment. Additional documentation detailing travel expenses must be attached to this application.
* **Personnel:** Requests for student personnel must include narrative demonstration that the student labor is directly related to the grant proposal. Faculty or staff salaries and faculty release time will not be approved.
* **Equipment:** Desktop or laptop computers and major office equipment will not be approved.

If the proposed budget exceeds assessment grant allowance, identify funds to be contributed from other departments and explain assurance of funding.

**Budget Table**

|  |  |  |  |
| --- | --- | --- | --- |
| **Equipment** | **Unit Price** | **Quantity** | **Total** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Equipment Subtotal** |  |
| **Supplies** |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Supplies Subtotal** |  |
| **Student Personnel** |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Labor Subtotal** |  |
| **Travel** |  |  |  |
|  |  |  |  |
| **Travel Subtotal** |  |
| **Services** |  |  |  |
|  |  |  |  |
| **Services Subtotal** |  |
| **Other** |  |  |  |
|  |  |  |  |
| **Other Subtotal** |  |
|  |  |  |  |
| **Total Proposed Budget** |  |
|  **Total Contribution from Other Department(s)** |  |
| **Total Requested from Assessment Committee** |  |

### Timeline

Provide a month-by-month plan. Note that all funds awarded must be used/requisitioned by the end of the fiscal year following all state and university guidelines. Any funds remaining will be returned to university funds.

### Reporting

If awarded a grant, I understand that post-project, I will be required to attend a [Student Learning Outcomes Assessment Committee](https://www.atu.edu/assessment/committee.php) meeting to provide a brief presentation on the findings of the funded project and submit a report documenting project measurements, analysis, expense report, and a determination of program effectiveness. Please sign and date below:

Applicant Name: Date of Application:

Email the completed application, along with any applicable attachments, as one document in PDF format to:

Amanda Gardner
Assessment Specialist
University Assessment and Accreditation

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