**Academic Community Engagement (ACE) Project Funding Request**

Faculty Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus Phone: ext.\_\_\_\_\_\_\_\_\_\_ Campus Box:\_\_\_\_\_\_\_\_\_\_ E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Proposal:** *Please submit in writing the following details:*

* Course Number & Title
* Partnering Agency Contact Information & Mission Statement
* Target Issues project will address (i.e., education, environment, human need, public safety)
* Project Description (including any information relative to student orientation)
* Potential Liability Issues (i.e., background check for students working with vulnerable populations)
* Course Objectives
* Anticipated Student Learning Outcomes
* Anticipated Community Outcomes
* Justification for Expenditures

**Budget Proposal:**

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| --- | --- | --- | --- |
| Quantity | Item – Description | Cost per Unit | Item Total |
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| TOTAL | | |  |

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Faculty Applicant Date Department Chair Date

Return to the Bonner Faculty Associate, Dr. Julee Tate, at campus box 495044 or Evans Hall 206B.