

**St. Cloud State University Special Initiative Award**  
**Application and Tracking Sheet**  
*Committee use only*

Applicant Name \_\_\_\_\_ Department \_\_\_\_\_

Project Name \_\_\_\_\_

**PROPOSAL COMPLETE?**

- Proposal Goals and Objectives
- Project Description
- Scope and Expertise
- Rationale/Alignment
- Anticipated Challenges
- Timeline of Activities
- Outcomes
- Evaluation Plan
- Dissemination
- Budget
- Sustainability

**COMMITTEE REVIEW OF PROPOSAL**

- Accept proposal and forward to president/designee for a decision
- Reject proposal and return to applicant(s) with rationale
- Make suggestions for improvement reject proposal and return to the applicant(s)
- Applicant accepts/declines the award

Date \_\_\_\_\_

**SUPERVISOR'S COMPLETION ACKNOWLEDGEMENT**

- Completed the project
- Did not complete the project

**PRESIDENT OR DESIGNEE'S FINAL DECISION**

- Approved for payment of \_\_\_\_\_
- No payment