

Proposal Form:

Wellbeing & Success Mini-Grant Program for Full-time Faculty & Staff

Name:

Department/School/Area/Unit:

Email:

BRIEF DESCRIPTION OF PROPOSED PROJECT/ACTIVITY:

ALIGNMENT OF PROPOSED PROJECT/ACTIVITY WITH APPLICANT'S POSITION AT TTU:

OBJECTIVES/DELIVERABLES OF THE PROPOSED PROJECT/ACTIVITY:

DETAILED BUDGET, INCLUDING COSTS ASSOCIATED WITH EACH ITEM FOR WHICH FUNDS ARE REQUESTED:

Applicant's immediate supervisor:

Supervisor's signature, indicating support for this proposal:

Applicant should route signed package to the Office of Faculty Success (luciana.c.cavazos@ttu.edu) by 12/11/23.