



Grant Routing Form (GRT-F003)

This process is for grant projects with funding greater than \$10,000 and all grants that require matching funding.

Process:

Complete *Project Overview*, *Finance (a), (b), (c)* and then submit this form with a copy of the grant either by courier to the Assessment/Accountability Office and email to grantreview@cmcsc.net.

I. Project Overview (Grant Title)

II. Finance

a. Amount requested:

b. Does the grant require matching benefits? No Yes Amount? _____
Describe how you plan to address this requirement.

c. Has the funding been discussed with the Senior Accountants?

No Yes Date: _____ Name of Accountant: _____

d. ***Business Affairs Department completes this section:***
Are there funding concerns that need to be addressed?

III. Reader

a. ***Grant Reader completes this section:*** Name: _____

Does the grant application clearly convey the work proposed so that individuals who are not educators are able to clearly visualize the work? What questions do you have after reading the grant?
(comments/concerns)