 **Grant Agreement/Amendment Cover Sheet for District Signatures**
**Forward this completed cover sheet along with the original(s) of the agreement to the
Vice Chancellor, Educational Services & Technology**

Per Board Policy, a limited number of personnel are authorized to sign grant agreements. Please input the correct authorized signatory and title on the agreement as follows:

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| --- | --- |
| **Type of Agreement**  | **Authorized Signatory**  |
| New Grant | Dr. Byron D. Clift Breland, Chancellor |
| Amendment to an Existing Grant *(Please select one colleague to sign)* | Dr. Byron D. Clift Breland, ChancellorFred Williams, Vice Chancellor, Finance & FacilitiesErika Almaraz, District Executive Director, Fiscal Affairs  |

**Agreement #** *(as assigned by the funder):*

**How many originals of the agreement have been included?:** Click or tap here to enter text.

**This agreement is submitted by**: Lisa King

**How do should the agreement be returned** *(from the District Grants Office)?:*

[ ]  **Interoffice to** *(Name and Department):* Click or tap here to enter text.
**OR**
[ ]  **Call for pickup** *(Name and Phone Number):* Click or tap here to enter text.

**Provide the following information regarding the attached agreement.
Before receiving funds, all funds must be approved by the Board. The following information will assist in confirming these funds have been Board-approved.**

Was this grant already approved by the Board? (Select one from 1 to 4 below)

[ ]  1. Yes, this amount was included in a Board agenda item that has been Board-approved.

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| **Please provide the Board approval date:** Click or tap here to enter text.**Please provide the assigned Banner Fund #:** Click or tap here to enter text.*(If a Fund # hasn’t been assigned, then this grant may not have been Board-approved yet).*  |

[ ]  2. Yes, this amount was included in the District’s proposed budget for the current fiscal year; approved in early September.

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| **Please provide the assigned Banner Fund #:** *(If a Fund # hasn’t been assigned, then this grant may not have been Board-approved yet).* |

[ ]  3. No, but this amount will be included in the District’s proposed budget for the current fiscal year; approved in early September. A signature from Campus Fiscal Office is required.

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| \_\_\_\_\_\_\_ Campus Fiscal Office initials. *(Confirm that you will be including this in the proposed budget. If not, then must use section 4 below)***Provide the Fund # to be used for the proposed budget input**: Click or tap here to enter text. |

[ ]  4. No, this amount still requires Board approval. (Provide the items & complete a or b below)

Please prepare and attach (also email copies to the District Manager, Fiscal Affairs)

* **Board Item.** Please work with your campus CGA to prepare the document.
* **Banner Budget Details (using the template).** This must include the Banner ORGN, ACCOUNTS, and PROGRAM numbers to be used. Contact your campus budget office for assistance. A fund number will be assigned by the District upon the receipt of these documents.

Please complete the following information regarding these funds (select a or b).

[ ]  a. These are additional funds to be received for an existing grant
Please provide the Banner Fund # assigned to the original agreement:

[ ]  b. This is a new grant
Has a Banner Fund # already been assigned?
 [ ] Yes. Please provide the assigned Banner Fund #: Click or tap here to enter text.

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| [ ]  No. A Fund # needs to be assigned. (Please provide all the following information to help determine the proper assignment and set-up of a Banner Fund #)  Term of the Grant (Start and End Date): Click or tap to enter a date. to Click or tap to enter a date. [ ]  This is a one-time grant OR [x]  This grant will be recurring. (How many years?):  |
| Fiscal Agency (e.g. US Department of Education): Click or tap here to enter text.Mark one: [ ] Federal [ ] State [ ] Local/Private |

**The following Campus-level review and signatures are required.
Please have the following personnel initial as having reviewed the attached agreement.**

|  |  |  |
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| **Initials**  | **Category**  | **Name** |
|  | Grant Project Manager  |  |
|  | Campus Grant Administrator  |  |
|  | Campus Fiscal Officer  |  |

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| **Vice Chancellor Educational Services & Technology: Review Complete \_\_\_\_\_\_\_\_\_** |
| **District Executive Director, Fiscal Affairs:** [ ] **County Resolution Needed** [ ] **Move forward for Signature \_\_\_\_\_\_** |