FOOTHILL-DE ANZA
COMMUNITY COLLEGE DISTRICT

DISTRICT GRANTS DEVELOPMENT OFFICE

GRANT INTAKE FORM

The first step in our collaborative grant development process.

ESTIMATED TIME TO COMPLETE
10–15 minutes

*All fields marked with * are required.*

WELCOME!

Use this form to initiate consultation with the District Grants Development Office for a prospective funding opportunity or project idea. This short form helps us learn about your project, understand your funding opportunity, and connect you with the right level of support. You can save your progress and return later if needed.

*All fields marked with * are required.*

1 FUNDING OPPORTUNITY *Tell us about the opportunity you are considering.*

1. Funding Opportunity / Solicitation Name *

2. Funding Agency / Organization *

3. Funding Opportunity Number

If applicable.

4. Funding Opportunity Link

Web address of the published solicitation or program page, if available.

5. Proposal Due Date *

MM / DD / YYYY

6. Anticipated Funding Request / Award Amount *

Approximate total amount you expect to request.

$

7. Funding Source / Agency Type * *(Select one)*

Select the option that best describes the funding source.

- ○ Federal Agency
- ○ State Agency
- ○ Local Government / Public Agency
- ○ Foundation / Philanthropic Organization
- ○ Corporate
- ○ Other:

If State Agency, identify funding type:

- ○ Categorical Grant Fund
- ○ Competitive Grant Fund
- ○ Other / Unsure:

8. Match Required? * ○ Yes ○ No ○ Unknown

9. Will FHDA serve as Fiscal Agent? * ○ Yes ○ No ○ N / A

10. Are Subrecipients / Funded Partners required or anticipated? * ○ Yes ○ No If yes, number anticipated:

2 PROJECT OVERVIEW *Tell us about your proposed project and what you hope to accomplish.*

1. Proposed Project Title *

2. Brief Project Summary *
Provide a 2–3 sentence overview of your project idea. (Up to 500 characters.)

3. What problem or need will this project address? *
Provide a brief description. (Up to 500 characters.)

4. What do you hope to achieve with this project? *
Share your primary goals or desired outcomes. (Up to 500 characters.)

2.1 INSTITUTIONAL ALIGNMENT *Identify the primary institutional alignment for the proposed project.*

1. Primary Institutional Alignment * *(Select one)*

- ○ **Foothill College** — Mission & Vision
- ○ **De Anza College** — Mission & Vision
- ○ **District Office** — District Mission & Strategic Priorities

2. How does the proposed project idea advance or align with the mission, vision, and / or strategic priorities identified above? *

A brief description is sufficient. The District Grants Development Office will further assess strategic alignment during the review process.

3. Do you anticipate this project will involve a data request or support from Institutional / College Research? *

○ Yes ○ No

3 PROJECT TEAM *Who will lead and support this project?*

1. Primary Project Lead *
First and Last Name

2. Email *
name@fhda.edu

3. Phone
Optional

4. Department *
Enter department

5. College / District Unit *
Foothill College / De Anza College / District Office

6. Immediate Supervisor / Administrator *
First and Last Name

4 BUDGET SNAPSHOT *Preliminary information to help us support your project.*

1. Estimated Project Size *
Select the range that best represents your project.

- ○ Under $100,000
- ○ $100,000 – $500,000
- ○ $500,001 – $1,000,000
- ○ Over $1,000,000
- ○ Unknown

2. Does the funding opportunity specify restrictions on indirect cost recovery? *

○ Yes ○ No ○ Unknown

If yes, please describe any limits. (Up to 300 characters.)

3. Does the proposed project require equipment or program supplies? * ○ Yes ○ No ○ Unknown

If yes, briefly describe known equipment or supply needs.

4. Does the proposed project require additional staff hiring? * ○ Yes ○ No ○ Unknown

5. Is the proposed project intended to be institutionalized beyond the grant period? * ○ Yes ○ No ○ Unknown

Institutionalized means the program or service is intended to continue with institutional support after grant funding concludes.

5 CONFIRMATION & LEADERSHIP ENDORSEMENT *Review and acknowledge.*

5.1 APPLICANT CONFIRMATION

☐ I confirm that I have discussed this funding opportunity with my immediate supervisor or appropriate administrator and understand that additional institutional review and approvals may be required before proposal development and submission. *

Submission of this form initiates consultation and review by the District Grants Development Office. Submission does not constitute institutional authorization to develop or submit a grant proposal.

5.2 COLLEGE / UNIT LEADERSHIP ENDORSEMENT *To be completed by the appropriate college or District executive.*

☐ I confirm that college / unit leadership is aware of and supports further consideration of this funding opportunity and proposed project concept.

Endorsing Executive * *(Select one — choose the executive whose area the proposed project falls under)*

- ○ VP of Finance and Administrative Services
- ○ VP of Instruction
- ○ District Unit
- ○ Multiple — collaborative project (complete one row per participating unit)
- ○ VP of Student Services
- ○ VP of Workforce Development and Economic Advancement

COLLEGE / DISTRICT UNIT	ENDORSING EXECUTIVE (NAME AND TITLE)	INITIALS	DATE

Complete one row. Additional rows are provided for projects spanning more than one college or District unit.

Leadership endorsement confirms support for the opportunity to advance through institutional review. It does not constitute final authorization to develop or submit a proposal. Final authorization is subject to completion of the District Grants Development Office review and approval process.

WHAT HAPPENS NEXT?

1. Intake Received
We review your intake and acknowledge receipt.

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2. Initial Consultation
We connect with you to learn more about your project and funding opportunity.

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3. Internal Review & Assessment
The opportunity is evaluated for strategic alignment, readiness, capacity, risk, and competitiveness.

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4. Executive Decision & Authorization
A Go / No-Go determination is completed and required institutional authorization is secured.

→

5. Service Pathway Assigned
Approved projects are assigned the appropriate proposal development service pathway.

→

6. Proposal Development Begins
The District Grants Development Office partners with the project team to guide proposal development and submission.

Need help? We're here for you.
A member of the District Grants Development Office will review your request and contact you to schedule an initial consultation.
thomasamanda@fhda.edu

INTERNAL USE ONLY *Completed by the District Grants Development Office upon receipt.*

Intake Form ID Assigned: _____ **Date Received:** _____