

# SUNSHINE FUND PROJECT CONCEPT FORM

Project Title	Project Initiator
Dept. Title	Funding Source (if known)
Chair's Review (Signature)	Date:
Deans Approval (Signature)	Date
Application Deadline	Start/End Dates of Grant

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## 1. Description of Evidence-based Need

- Please describe the current problem, question, or situation this project will address (e.g. data, research, department statistics):
- What is the need or want, resulting from this problem/question/situation?
- How will this project address this problem/question/situation?
- What specific strategic directive will the project address? (Please refer to the current published [Strategic Directions on the SUNY Broome Institutional Effectiveness website](#).)

## 2. Target Population

- Who will the project serve? Does it easily transfer or expand beyond the pilot to other students, classrooms and/or areas of campus?
- How many?
- Please describe how this project will enhance SUNY Broome students' learning experience:

## 3. Project Description

- Please describe, in detail, how this project will encourage interdisciplinary and/or community agencies/organization collaboration:
- Please describe, in detail, the cross-disciplinary approach to teaching that this project will employ/develop:
- Please describe, in detail, the innovative teaching methods this project will promote:
- Please describe, in detail, the project's objectives and expected outcomes and how they relate to specific Institutional and Course Learning Outcomes (ILOs and CLOs).
  - How will the project be measured for success? (Please provide measurable outcomes that address the above stated project objectives & outcomes.)
- Where will the project be carried out?
- Who will be the key players in the project?

## 4. Project Duration

- What is the anticipated project duration?
- Will the project's impact extend beyond the project timeline?

5. Project Needs and Costs (Outline costs)

- Will this project have continuing costs, and if so, how will that be funded?
- What if any equipment will be needed?
- Computer Resources: data, phone, network and licensing needs or requirements  
Note: Be sure to list the needed equipment and costs, including computer resources and, if applicable, confirm that Information Technology Services has been consulted regarding any technology needs.
- What if any supplies will be needed?
- Will the project need personnel?
- Please describe any training and/or travel needs
- Facilities, Furnishings, Space requirements
- Please describe any other needs

6. Acknowledgement of End-of-Year Report

- Submit a project end report within 30 days of completion, detailing project outcomes. Signature required below.

Signature of Faculty/Staff \_\_\_\_\_ Date \_\_\_\_\_

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