

Name:	Division	ı:		
Title:	Phone:			
Email:				
Briefly explain your field of interest incl	luding a descri	iption of yo	ur proposed project or program:	
Do you plan to include partners?	Yes No	If yes,	please list names or types of partners	
Please list any funding agency you woul	d like specifica	ally include	ed in the search:	
Have you been awarded funding in the p	oast? Yes	s No	If yes, please list funding agencies:	
Estimated total project cost	Estin	nated total	project length	
under \$50,000		One time event		
between \$50,000 and \$300,000		1 year		
between \$300,000 and \$999,000		2 years		
between \$1 million and \$2 million		3 years		
over \$2 million		4 years or more		

Please send this form to the Grants Development & Management Office

Director: Bobby Becka rbecka@elcamino.edu 310-973-3134
Project Specialist: Jenny Hutcherson jhutcherson@elcamino.edu 310-973-3175