Unallowable Expenses

Grant Funds cannot be used to do the following:

- Support graduate programs
- Fund student recruitment, advertisement or direct fundraising
- Fund domestic or international student travel; nor international student employment or stipends
- Fund international travel of faculty or staff
- Fund activities or positions that were previously state funded (Supplanting)
- Fund projects that generate a profit
- Fund other activities that are deemed unallowable by Title III grant regulations.

	Document Attac	chment and Acknow	ledgement Section		
Proposal Narrative:			ers of Support (if applicable	e):	
	<i>F</i>	Acknowledgement S	ection		
As the Activity Director/Co-Acomply with the sponsoring a is true, complete and accura may subject me to criminal activity, including provision of these funds, I have not be authority to deny any aspect	gency's terms and condition te to the best of my knowle civil, or administrative pe of required reports where fu een relieved of any other d	is for awards. I furth dge. I understand the nalties. I accept resunds are assigned to uties as defined or a	er certify that the informathat any false, fictitious, or sponsibility and accountal this activity. I understand assigned by my supervisor	ation submitte fraudulent sta bility for impl I that by accep r. Moreover,	ed within this form atements or claims ementation of the oting appropriation
Please indicate your acknowledg provided.		tatements by checking	the appropriate box below ar	nd inserting you Date:	16-1
☐ Activity Directo ☐ Co-Activity Direc	780	wit of		_ Date: 4	,/15/17

PROPOSAL REQUEST FORM

Date: 06/15/2017

	Activity	Director Data			
Activity Director:	Activity Director:			Department:	Teacher Education
Email: tiffany.pogue@asurams.edu			229-430-	4716	Fax:
				The state of the s	
Co- Activity Director:	Bonnie Anderson, MBA			_ Department:	College of Education
Email: bonnie	anderson@asurams.edu	Phone:	229-430-4	4685	Fax:
	0	was al Darto			
Title of Business I. S		posal Data	re A nonul	otion curron	tly underropresented in
	upporting the Development of Bl	ack reache	is, A popul	ation curren	<u> </u>
	le United States Please indicate below the performance peri	iad of your prop	and The mane	o la fuana 1 ta C i	Jacoba V
	·		_		•
Start Date: Ch	oose an item. October 1, 2017 E	nd Date: _Cnoc	se an item.	September :	30, 2022
Proposal Class: Ch	oose an item. New Proje	ect Type: Choc	isa an itam		
rioposai ciass cii	oose an item. New Proje	crioc	ise an item.	10-11-1-11-11-11-11-11-11-11-11-11-11-11	
Project Location: Cho	ose an item. Albany State Un	iversity Rad	dium Spring	ns Campus	
Where will the project					Other:
	- Dilly O. Di	ack Building		1. 100	Other.
will additional space	or renovation be required? Bu	□Yes 反N dget Data	10		
Total Amount of Title		78,975.00			
	•	10,010.00			
Total Funding Allocat	·				
	ring or Matching Funds? □Yes □XNo atching Source Account Name(s)	Sa	urce Account N	lumher(s)	Amount(s)
	y		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$
					\$
	· ·				<u> </u>
	Key Po	ersonnel Data			
Title	Department/Unit	Release Time %	Salary Requested	Fringes Requested	
Director		10 %	\$ 15000		
Co-Director	College of Education	10 %	\$ 15000	\$ 5737.50	
		%	\$	\$	
		%	\$	\$	
		% %	\$	\$	
		%	\$	\$	
		70		<u> </u>	<u>,</u>
		nd Certifications	Data		
,,	s activity likely to result in Intellectual Prope	-		to at the	
	activity director or co-activity director currently (To search, please visit https://www.sam.gov.		suspended or i	neligible to rece	ive federal or non-federal
	the proposed work include Human Subject		, IRB approval a	nd reporting to fu	nding agency is required.)
	·			_	

Approval Signatures	The second second second
Department Chair/Unit Director: Thanda C. Forter	Date: 6/15/17
Department Chan, of the Constant of the Consta	,
a de martinale	Date:
Dean (if applicable):	_
	Date:
Area Vice President:	_ _
	Date:
Title III Administration*:	
*Indicates that the proposed activity is in compliance with terms and conditions of the Title III Grant Program.	
Please upload approval signatures excluding Title III Administration as indicated in the Document Attachment Section on pag	e 2.
Please upload approved agreement	
To be Used by Title III Administration ONLY	
10 be used by Title in Administration Comments	
Status of Proposal:	
Date:	
Date.	
Notes:	

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