

PROVOST ASSESSMENT FUND APPLICATION

NAIVIE:	SCHOOL:	DATE:			
TITLE OF PROJECT:					
Brief Abstract of Project (Concise description of the assessment project, including an explanation of how the assessment activities in the proposed project go beyond the regular faculty contractual responsibility for assessment):					
Background Work (Summary of current assessment wassessment work:	vork, specifically noting improvements ma	ide based on that			

Program goal or learning outcomes (Explain how this proposed assessment project specifically maps to the
program goals in Section A of the Annual Report and/or the program-level student learning outcomes in Section C of the Annual Report):
Timeline (Timeline for the proposed assessment project):

Budget	:	
I.	Salary/Stipend	
	a. Faculty	\$
	b. Student Workers	\$
	c. Other (indicate):	\$
		I. Total: \$
II.	Non-Salary	
	a. Travel	\$
	b. Equipment	\$
	c. Supplies	\$
	d. Registration Fees	\$
	e. Other (indicate):	\$
		II. Total: \$
III.	Other (indicate):	\$
		III. Total: \$
		GRAND TOTAL \$

Budget Narrative (Explain how the proposed project will benefit the program):

ssessment Use (Future plans for assessment ເ	using this project, if	any):	
understand that if I should be granted this award Procedures. Further, I am required to submit a wr disseminate the results of my work to the University	ritten Annual Report w		
disserningle the results of my work to the officers	ty community.		
Applicant Name	S	ignature	Date
This program encourages cost share with the app a commitment of funds from the School, the application of the request project.	cant's Dean must indi	cate support for the reque	st. By signing this
·			
Dean's Signature	Date	\$ Amount Committee	l, if appropriate
Submit applications to	the Provost Office vi	a the Program's Dean	
	, iiio i 1000ai Oiilee Vi	a iiio i loulaili 3 Deall.	

Submit applications to the Provost Office via the Program's Dean.

Deans will respond to program requests in ways that treat programs fairly and equitably.