

## SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT EQUAL EMPLOYMENT OPPORTUNITY COMMITTEE DIVERSITY PROJECT GRANT APPLICATION

Grant Application Type:	☐ Individual ( (max \$4,000)	Grant □	Group (		
APPLICANT INFORMATION	N				
Name of Primary Applicant:					
If group, group members:					
Group member affiliation(s):	□ Stu	dent □	Staff/Ac	lmin	□ Faculty
(If more than one type, grant maximum is \$6,500)		□CSM □ Cañada □ Skyline □ D			
PROJECT INFORMATION (	use additional pag	es as need	ded)		
Project Name:					
Project Description:					
Grant Amount Requested: \$_			_		
Please attach (1) a detailed time evaluation plan, and (4) desired	, ,	budget, (3	) a proje	ct impleme	ntation and
DISTRICT DIVERSITY VAL	<b>UES</b> (use addition	al pages a	as neede	d)	
Please explain how your project	aligns to the Distri	ct's diversi	ty, equity	/ and inclus	sion values: