The StudentSuccess Impact Mi Grant is designed to positively impact student success and address the inclusive excellence planOne-time mini grants will be available support activities and/or projects proposed by faculty (T/TT, NTTR, Visiting Assistant Professors, and temporary lecturers who have three or more yetians subtrvice are eligible) that are aligned with the college success and retention initiatives as stated in then Alasive Excellence Plan and NKU's Strategic Framework. The focus of the Studentess Impact Mini Grant is to directly support students and activities/projects that, at the end of the initiative, will have an immediate impact on student success (retentin, graduation, ense of belonging) in Ats & Sciences programs. The maximum abount of funding is\$1000.

Guidelines

Applications

- x Applications should be completely filled t.
- x Applications must be endorsed by the department chairector.

Other Requirements

- x Funds should be dedicated towards efforts supporting current NKU students or outreach efforts that may impact recruitment of students from communities historically excluded from college.
- x Faculty may only receive funds up to \$10000 ing the fiscal year (Julyst1through June 300). This means that a faculty memberis awarded one project at \$300, they may still apply for up to \$5700 nother application during that fiscal year.

Award Funds

x University policies around purchasing, travel, etc. must be followed as outlined a https://t2326.28 8.3 (e)F3 (y)6. (aftu (n)-0.8 (e)-5.. (c)-28 8.3 (k (e)51.6 (u)-0.. (c)-6 (e)-u (n)-0.4 (u)10.5 (/t)7.9 (p)-



Equity, Diversity, and Inclusion Impact Mini Grant

FacultyName:		:	Email
Activity/Project Title:			
Date(s):			
Estimated Cost:	Amount Requested from the college:		
Are you requesting money from another sponsor?	Yes	No	(f yes, amount requested?)
Please provide a brief description of the EDti vity/pro	oject (no mo	ore thar	n 300 words)
Describe how the activity/project aligns with the Co Success by Design:	ollege of Art	ts & Sci	ience Inclusive Excellence Plan and/or
Please provide ainternized account of costassociated funding sources even if the total exceeds (\$00):	d with theac	tivity/pr	oject (nclude all expenses and their
Department Chair/Director_	onartanas ef	thio pro	Date: