



OFFICE OF ADVANCEMENT

Prospect Clearance Form

Name and Department:

Title of Proposal or Project:

Proposal or Project Due Date: _____

Type of Proposal or Project:

Research/Project Grant _____ Sponsorship _____ Other _____

Brief Description of Project/Program:

Names and Location (City and State) of Individuals, Foundations or Corporations (if known) You Plan to Solicit (attach list if more room is needed):

Total Project Goal: \$ _____

Amount Requested in this Grant: \$ _____

Other Funding Source(s):

Requestor

Name	Date
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Approval of Department Chair or Senior Officer:

Name	Date
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Approval of Dean or Vice President:

Name	Date
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Please return your completed form to:

**Office of Advancement
Catron Alumni House
615.547.1269
615.443.1806 (Fax)
advancement@cumberland.edu**