

East Tennessee State University Strategic Initiative Fund Request

Fiscal Year: _____

Date of Submission: _____

Applicant Name/Department/College: _____

Project Title: _____

1. Project Overview

Provide a brief description of the project, including its objectives, the strategic initiatives it supports, and how it contributes to the overall ETSU strategic plan. Explain the time-limited nature of the project, including its start and end dates.

2. Strategic Alignment

Describe how this initiative directly supports the ETSU strategic plan and its priorities. Be specific in connecting the project to ETSU's vision, such as improving academic quality, supporting research and scholarly activity, or addressing operational efficiency.

3. Funding Request

State the amount of funding requested from the Strategic Initiative Fund. The funding should be allocated for time-limited, non-recurring expenses.

4. Justification for Funding

Explain why the initiative requires funding beyond the base budget and available resources. Provide specific details on what the funds will be used for, such as equipment, research, or special projects.

5. Expected Outcomes and Impact

Identify measurable outcomes and the expected impact on ETSU. Include metrics or other key performance indicators to demonstrate how success will be evaluated.

6. Timeline

Provide a timeline for the project, including major milestones and completion dates. Ensure that the timeline is realistic and fits within the proposed funding period.

7. Oversight and Accountability

Identify the individual or committee responsible for overseeing the project. Ensure that there are clear lines of accountability and that the project is managed effectively.

8. Sustainability

Explain any plans for sustaining the initiative after the strategic funding period ends. This may include funding from other sources or the integration of project outcomes into the department's ongoing activities.

Signature of Applicant: _____

Approval from Division Leader:

Name/Title of Divisional Leader: _____

Signature: _____

Date: _____