



CSN FOUNDATION

A Foundation for Growth in Nevada

Spirit of CSN Grant Award

2026-27 Assessment Plan & Approval

Assessment Plan and Approval

Proposal Title:

Primary Contact:

Project Effectiveness and Your Assessment Plan: What project activities will you assess for project effectiveness? What tools or measurements will you use to evaluate the effectiveness of your project and determine the impact on students? When will you deploy your assessment measures to collect data? If institutional research data is needed for your assessment, please complete your request using the on-line [portal IR request form](#).

Your project's Assessment Plan must be reviewed by Sharon Peterson. Please send this Assessment Plan document to Sharon.Peterson@csn.edu for approval. Please allow ample time when working with campus partners.

This form must be included in the submitted application.

For Sharon Peterson

I have reviewed and approved the Assessment Plan for

Proposal Title

Name

Signature

Date

Please direct any questions to: foundation@csn.edu