



Spirit of CSN Grant Award Application

The College of Southern Nevada (CSN) Foundation Board of Trustees invites faculty and staff to apply for a Spirit of CSN Grant Award.

The purpose of the Spirit of CSN Grant Award is to support faculty and staff in furthering CSN's mission to support our commitment to students first, supporting program innovation and the discovery of new ideas.

Priority consideration will be given to projects, programs, initiatives, that support CSN and NSHE goals that move the CSN student success metrics forward during the 2026-2027 academic year (July 01, 2026 – June 30, 2027).

Projects must demonstrate measurable improvements in student metrics like graduation and retention rates, demonstrate increased certificate and degree completions. More importantly, proposed projects must align with CSN's Strategic Bridge Plan 2025-27 and are open to all students.

Grant Timeline:

- Application closes: Sunday, March 15, 2026, all submissions must be emailed to foundation@csn.edu, no late requests or submissions will be accepted.
- Award recipients will be notified, via email, by Friday, May 15, 2026.
- All awards must be spent in full between July 01, 2026 – June 30, 2027. All unused funds will be returned to the CSN Foundation.
- All expenses must be completed, processed and posted by June 01, 2027, no exceptions.
- If awarded, progress reports are due to the Foundation via email on December 01, 2026, and June 01, 2027.

Application and Attachments:

Please ensure you have completed all of the necessary file attachments for your application. You must use the forms provided.

YOUR APPLICATION WILL NOT MOVE FORWARD IF THE FOLLOWING ITEMS ARE NOT COMPLETED IN THEIR ENTIRETY

1. **Spirit of CSN Grant Award Application**
2. **Approval Form Grant Request:** If your proposal requires additional coordination, partnership, and/or approval from CSN departments they will need to sign off indicating they approve if the project is funded. Please allow ample time when working with campus partners.
3. **Assessment Plan and Approval Form:** Obtain signature(s) and return with your submitted application. Please allow ample time when working with campus partners.
4. **Budget Form:** This form must include all expenses. Total amounts need to be actual costs, not estimates, and be returned with your submitted application. Your budget form can include quotes, attachments, and screen shots as supporting documentation.



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Grant Application Requirements and Responsibilities:

- Ensure your proposal is ready to execute and implement immediately if awarded. It should not be in the draft stage.
- It is your responsibility to ensure your grant application and attachments are completed in their entirety and processed in accordance with the specified timelines.
- Applicants may request up to \$10,000. The final award amount is at the discretion of the review committee.
- Committees must be recognized by CSN and cannot be organizations outside of CSN.
- Any application not approved by your Chair and Dean for faculty, direct supervisor and a director-level or above individual in your department for non-faculty will not be considered for funding.

Grant Award Limitations:

- The Spirit of CSN Grant Award is intended to provide start-up or one-time funding. It is not intended to supplement things not included in the unit/departmental budget.
- The Spirit of CSN Grant Award is intended to support faculty and staff. For funding opportunities student organizations should reach out to Brian Akins, Director of Student Life and Leadership Development.
- While the Foundation accepts repeat applications from recipients, proposals cannot receive funding for more than two years.
- The award will not fund proposals requesting scholarships, reduced tuition, awards, bookstore vouchers, or personal use.
- Events, prizes, hosting, gift cards, or swag, without a clear impact or return on investment related to moving Students First forward, will not be funded.
- The award will not fund federal work study or NSHE employees' (independent contractor, faculty or staff) salaries or stipends, as this is considered a conflict of interest.

Funding for the Spirit of CSN Grant Award has been made possible through the generosity of our supportive donors.

Questions? Please contact the CSN Foundation at foundation@csn.edu.

To see past award recipients - please visit the [Spirit of CSN Grant Award Website](#).



Award Application - Overview

Primary Contact:

Position/Department:

Phone:

Email:

Campus (if applicable):

Proposal Team (if applicable):

Proposal Title:

How many students will be impacted by your proposal?

Type of award requested:

Examples: Program Support, Pilot Program, Equipment, Training, Conference, Other

Amount Requested:

Total Program Budget:

Summary: In one to two sentences, summarize your proposal, what are you requesting funding for and how will you use the funds.



READ CAREFULLY: Please respond to each of the following questions below individually in 250 words or less. All questions require a response.

- **Proposal Introduction:** Explain your proposal, its need and purpose, and why award funds are requested. What challenges/opportunities does your proposal seek to address?
- **Goals and Outcomes:** What are your goals and outcomes of this proposal? What will a successful project look like?
- **Action Plan and Timeline:** If awarded, all expenses must be completed, processed and posted between July 01, 2026 - June 01, 2027, no exceptions. What is your 12-month action plan and timeline to do so?
- **Student Impact:** How many students will be impacted by your proposal? If successful, what will be the intended outcome or the result on existing student success and/or rates of student completion?



- **Does your proposal seek to:** Recruit students into a degree or certificate program? Retain students in a degree or certificate program? Increase completion and graduation rates of students in a degree or certificate program? If so, explain how.
- **Stakeholders:** Identify students, internal, and external stakeholders in your project. Have they been consulted? How do they ensure the success of your project?
- **Marketing and Awareness:** Describe how you will foster greater institutional engagement and shared responsibility for student success. What is your plan for sharing your project, work, results, and impact with internal and external communities?
- **Budget and Resources:** Provide a project budget summary to accompany your attached budget of how the grant will be utilized. List other sources of funding, if applicable (ie. CSN Budget, other grants or donations). Note, you will be required to track your expenses and perform reconciliation during your two progress reports.



- **Campus Partnerships:** Does your proposal require coordination, partnership, and/or approval from other CSN departments? If so, please indicate the department and the nature of the partnership below. Some examples of campus partnerships may include but are not limited to CSN General Counsel, CSN Human Resources, CSN Office of Technology Services.

- **Long-term Sustainability and Scalability:** Describe the plan to sustain and institutionalize your project. What resources would be needed if CSN chooses to institutionalize your project? How can this project be sustained and scaled in the long term?

- **Succession Planning:** If you term out or move on from your current position/role/organization, what is the succession plan if awarded this grant? Who is responsible for implementing the proposal? Please have them sign off on your Approval Form indicating they approve if the project is funded.



Page 7 of 9



- **Goal IV: Meet Workforce Needs in Nevada.**

- **Goal V: Increase Solutions Focused Research.**



Acknowledgment:

It is your responsibility to ensure your grant application and attachments, listed below, are completed in their entirety and processed in accordance with the specified timelines.

Please use this checklist to ensure you are sending in all of the necessary files for your application.

Spirit of CSN Grant Award Application

Approval Form Grant Request

Assessment Plan and Approval

Budget Form

You will not be notified if your application is incomplete.

Please check and initial here to confirm that you have submitted the application and attachments in their entirety.