



Smithsonian Latino Center

FY 2017 LATINO INITIATIVES POOL APPLICATION

PROJECT COVER SHEET

PROJECT TITLE	
UNIT	
POOL REQUEST AMOUNT	\$
TOTAL BUDGET	\$

PROJECT SUMMARY (no more than 100 words)

CONTACT INFORMATION

PRINCIPAL INVESTIGATOR /PROJECT LEADER

(Name)	(Title)
(Unit)	
(Mailing Address)	
(Email)	

FINANCIAL MANAGER

(Name)	(Title)
(Email)	(MRC)

DEPARTMENT/DIVISION HEAD (IF APPLICABLE)

(Name)	(Title)
(Email)	(MRC)

UNIT DIRECTOR

(Name)	(Title)
(Email)	(MRC)

PROPOSAL DETAILS

DATES FOR FY 2017 PROJECT

(Start)	(End)
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PROJECT WEB ADDRESS (IF APPLICABLE)

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TYPE OF AWARD REQUESTED

<input type="checkbox"/> Research	<input type="checkbox"/> Collections	<input type="checkbox"/> Exhibitions & Programs	<input type="checkbox"/> Education & Access
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BUDGET OVERVIEW

FY 2017 Latino Initiatives Pool Request	\$
Unit Contribution for the Project	\$
Matching External Funds Received	\$
Matching External Funds to be Raised	\$
Total Project Budget	\$

TYPE OF PROJECT (*check all that apply*)

<input type="checkbox"/> Research	<input type="checkbox"/> Collections/Archives
<input type="checkbox"/> Exhibition	<input type="checkbox"/> Publication
<input type="checkbox"/> Public or Education Program	<input type="checkbox"/> Online/Web
<input type="checkbox"/> Other (please specify):	

CATEGORY (*check all that apply*)

<input type="checkbox"/> Art	<input type="checkbox"/> Design
<input type="checkbox"/> Media Arts	<input type="checkbox"/> History
<input type="checkbox"/> Music (recording)	<input type="checkbox"/> Performing Arts
<input type="checkbox"/> Science/Natural History	<input type="checkbox"/> Humanities (religion, jurisprudence, etc.)
<input type="checkbox"/> Other (please specify):	

Project Demographics

Age(s)	
Grade Level	
Target Number of People	

PROJECT WEB ADDRESS (IF APPLICABLE)

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PROJECT TEAM/COLLABORATORS

PROVIDE A COMPLETE LIST. *(Include other Smithsonian units or affiliates, schools, universities, outside institutions.)*

Name	
Title	
Unit/Organization Name	
Role on Team	

Name	
Title	
Unit/Organization Name	
Role on Team	

Name	
Title	
Unit/Organization Name	
Role on Team	

LATINO INITIATIVES POOL PRIORITIES

Explain how your project addresses the funding priorities. *(no more than 250 words.)*

GOALS *(no more than 250 words)*

LIST THE PROJECT'S GOALS AND DELIVERABLES:

PROJECT NARRATIVE *(No more than 1500 words)*

CLEARLY STATE THE PROJECT SCOPE, ACTIVITIES, AND IMPACT:

IMPLEMENTATION PLAN *(No more than 250 words)*

PROVIDE A WORK PLAN AND TIMELINE FOR THE PROJECT:

BUDGET

(Add additional rows as needed)

NOTE: Smithsonian staff salaries cannot be listed as a unit contribution. Additionally, award funds may not be used for any expense not specified in the budget below without prior authorization. Failure to comply with the guidelines will result in applicant's ineligibility for the subsequent year's LIP funding cycle.

1) Travel

Expense	Latino Pool Request	Unit Contribution	Other Funding Sources	Total
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Total	\$	\$	\$	\$

2) Transportation of Things

Expense	Latino Pool Request	Unit Contribution	Other Funding Sources	Total
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Total	\$	\$	\$	\$

3) Printing and Reproduction

Expense	Latino Pool Request	Unit Contribution	Other Funding Sources	Total
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Total	\$	\$	\$	\$

4) Contracts and other Costs

Expense	Latino Pool Request	Unit Contribution	Other Funding Sources	Total
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Total	\$	\$	\$	\$

5) Supplies and Materials

Expense	Latino Pool Request	Unit Contribution	Other Funding Sources	Total
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Total	\$	\$	\$	\$

PREVIOUS FUNDING HISTORY

Has this project previously been funded by the Latino Initiatives Pool?

No

Yes

If yes, please provide the following information and include a copy of the final report and/or a progress report for projects funded in FY 2016 and prior years:

Year of Award	
Amount of Award	\$
Type of Award	<input type="checkbox"/> Research <input type="checkbox"/> Collections <input type="checkbox"/> Exhibitions and Programs <input type="checkbox"/> Education and Access <input type="checkbox"/> Othe

BUDGET JUSTIFICATION *(No more than 500 words)*

THE BUDGET JUSTIFICATION SHOULD DESCRIBE HOW ALL COSTS WERE ESTIMATED. For example, for travel expenses please include the purpose of the travel (e.g., field interviews, advisory group meeting, etc.), and describe the basis of computation (e.g., six people for 3-day meeting at \$X airfare, \$X lodging, \$X subsistence.)

EVALUATION AND ASSESSMENT PLAN *(No more than 500 words)*

How will you assess the effectiveness/success of this project? What measures are in place to gauge your results?

SIGNATURES

I certify that to the best of my knowledge, the information I provided in support of this application is true and accurate.

Principal Investigator _____ Date _____

Financial Manager _____ Date _____

I fully support and endorse the project described above:

Department/Division Head _____ Date _____

Unit Director _____ Date _____

Smithsonian Latino Center
Capital Gallery
600 Maryland Avenue, S.W.
Suite 7042 MRC 512
Washington, D.C . 20013-7012