**FY 2020 LATINO INITIATIVES POOL APPLICATION**

**Cover Sheet**

|  |
| --- |
| Project Title (please keep concise)  |
| Unit (If multiple, list lead unit first) |
| Pool Request Amount – (Can’t exceed 80% of total budget) | $  |
| Total Budget  | $  |

Project Summary (no more than 150 words)

**Unit Contact**

Principal Investigator /Project Leader

|  |  |
| --- | --- |
| (Name) | (Title) |
| (Unit) |
| (Mailing Address) |
| (Email) (Phone) |

Financial Manager

|  |  |
| --- | --- |
| (Name) | (Title) |
| (Email) | (MRC) |

Department/Division Head (if applicable)

|  |  |
| --- | --- |
| (Name) | (Title) |
| (Email) | (MRC) |

Unit Director

|  |  |
| --- | --- |
| (Name) | (Title) |
| (Email) | (MRC) |

**Overview**

**Proposal Details**

Dates for FY 2020 Project:

Please note: Projects that extend beyond **18** months from receipt of funding are unlikely to be funded for the full timeframe. If a project will require more than 18 months to complete, applicants are encouraged to plan to request funding over multiple funding cycles.

|  |  |
| --- | --- |
| (Start) | (End) |

Project Web Address (if applicable)

|  |
| --- |
|  |

Budget Overview

|  |  |
| --- | --- |
| FY 2020 Latino Initiatives Pool Request | $ |
| Unit Contribution for the Project | $ |
| Matching External Funds Received  | $ |
| Matching External Funds to be Raised | $ |
| Total Project Budget | $ |

Type of Award Requested

|  |  |  |  |
| --- | --- | --- | --- |
| 🞎Research | 🞎Collections & Archives | 🞎 Exhibitions & Programs | 🞎Education & Access |

 Type of Project (check all that apply)

|  |  |
| --- | --- |
| ( ) Research | ( ) Collections/Archives |
| ( ) Exhibition | ( ) Publication |
| ( ) Public or Education Program | ( ) Online/Web |
| ( ) Other (please specify):  |

Category (check all that apply)

|  |  |
| --- | --- |
| ( ) Art | ( ) Design |
| ( ) Media Arts | ( ) History |
| ( ) Music (recording) | ( ) Performing Arts |
| ( ) Science/Natural History | ( ) Humanities (religion, jurisprudence, etc.) |
| ( ) Other (please specify):  |

Project Demographics

|  |  |
| --- | --- |
| Age(s) |  |
| Grade Level |  |
| Target Number of People |  |

**Project Team**

Provide a complete list of project team/collaborators

(Include other Smithsonian units or affiliates, schools, universities, outside institutions.)

*\*Do not modify format of application, but add additional boxes as needed.*

|  |  |
| --- | --- |
| Name |  |
| Title |  |
| Unit/Organization Name |  |
| Role on Team |  |

|  |  |
| --- | --- |
| Name |  |
| Title |  |
| Unit/Organization Name |  |
| Role on Team |  |

|  |  |
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| Name |  |
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| Unit/Organization Name |  |
| Role on Team |  |

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| Role on Team |  |

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| Name |  |
| Title |  |
| Unit/Organization Name |  |
| Role on Team |  |

**LIP Priorities**

Explain how your project addresses the funding priorities listed in the guidelines.

*(no more than 250 words.)*

**Project Goals**

List the project’s goals and deliverables using bullet points: *(no more than 250 words)*

**Narrative**

Clearly state the project scope, activities, and impact: *(No more than 1500 words)*

**Plan & Timeline**

**Implementation Plan** (No more than 250 words)

Provide a work plan and timeline for the project. The project timeline should be projected from a generic date of “receipt of funding” rather than specific months and dates.

Availability of funds is contingent upon when SI receives the Federal appropriation.

*\*Do not modify format of application, but add additional boxes as needed.*

|  |  |  |
| --- | --- | --- |
| Month 1  | * Order supplies
 | * Estimated Spending
 |
|  |  |  |
|  |  |  |
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**FY2020 Budget**

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 in the following year’s LIP funding cycle.

 Feel free to attach additional spreadsheet with detailed information. If a line item has numerous components such as purchases, a detailed attachment would be helpful.

(*Add additional rows as needed*)

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** | $ | $ | $ | **$** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Expense** | **Latino Pool Request** | **Unit Contribution** | **Other Funding Sources** | **Total** |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
| **Total** | $ | $ | $ | **$** |

4) Purchase orders and contracts (e.g., stipends, lodging, services)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Expense** | **Latino Pool Request** | **Unit Contribution** | **Other Funding Sources** | **Total** |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
|  | $ | $ | $ | $ |
| **Total** | $ | $ | $ | **$** |

 5) Supplies and Materials

**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 2018 and prior years:

|  |  |
| --- | --- |
| Year of Award |  |
| Amount of Award  | $ |
| Type of Award | ( ) Research ( ) Collections ( ) Exhibitions and Programs ( ) Education and Access( ) Other |

**Budget Justification**

The budget justification should describe how all costs were estimated. *(No more than 500 words)*

Please make sure to follow OCON procurement guidelines.

For example:

* Travel expenses need to include the purpose of the travel

(e.g., field interviews, advisory group meeting, etc.)

**and**

* Description of the basis of computation

(e.g., six people for 3-day meeting at $X airfare, $X lodging, $X subsistence)

* List all estimated contracts (make sure to provide quotes)
* Supplies and misc. expenses do not need to be itemized.

**Project Evaluation**

How will you assess the effectiveness/success of this project? What measures are in place to gauge your results? *(No more than 500 words)*

**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

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