

# President's Fund – Special Projects Program Application Form

## Applicant Information

Primary Contact Name: \_\_\_\_\_

MSVU Affiliation:  Student  Faculty  Staff

Department/Program (if applicable): \_\_\_\_\_

MSVU job title (if applicable): \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Additional Project Team Members (if applicable):

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## Project Information

Project Title: \_\_\_\_\_

Funding Category (select one):

- Student Experience
- Community Engagement
- Healthy Campus
- Student-Led Project

Total Funding Requested (\$CAD, max \$7,000): \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Brief Project Summary (150 words max):

*(Provide a concise overview of the initiative, its purpose, and expected impact.)*

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How does this initiative align with MSVU's mission, values, and strategic priorities?

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How does this initiative integrate equity, diversity, inclusion, and accessibility (EDIA)?

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Who will benefit from this initiative? What is the expected reach and impact?

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**Key Activities & Timeline:** *(List major project milestones and expected completion dates.)*

| Activity | Expected Completion Date |
|----------|--------------------------|
| _____    | _____                    |
| _____    | _____                    |
| _____    | _____                    |

**Budget Breakdown (Attach Additional Details if Needed):**

| Expense Item | Cost (\$CAD) | Description/Justification |
|--------------|--------------|---------------------------|
| _____        | _____        | _____                     |
| _____        | _____        | _____                     |
| _____        | _____        | _____                     |

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## Reporting & Evaluation

**Mid-Term Report Plan (Within 6 Months of Award):**

*(How will you track progress? What key performance indicators will you use?)*

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**Final Report & Knowledge Sharing Plan (Within 1 Month of Completion):**

*(How will you summarize and share results internally and externally?)*

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## Authorization & Submission

By submitting this application, I confirm that:

- The project meets eligibility criteria and is not part of regular operations.
- The project will be completed within 12 months.
- I understand the reporting requirements (mid-term and final reports).

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Submission Instructions:

Completed applications should be submitted electronically to [advancement@msvu.ca](mailto:advancement@msvu.ca) by **March 31, 2025**.

For questions or help applying, contact [advancement@msvu.ca](mailto:advancement@msvu.ca).