**Student Affairs Program Coordinating Council**

**Strategic Initiative Grant Program**

**Assessment Template**

Name of Applicant:       Phone Number:

E-mail:       Student Affairs Unit 1:

Name of Applicant:       Phone Number:

E-mail:       Student Affairs Unit 2:

(Optional) Other Co-sponsors (include information requested for all others)
Name:       Phone number:
E-mail:       Unit:

Strategic initiative addressed:
[ ] Enhance Knowledge & Appreciation of Diversity
[ ] Environmentally Sound and Culturally Relevant Facilities
[ ] Clarity and Enhancement of the Illinois Experience
[ ] Creation and Sustainment of Collaborative Partnerships
[ ] Improvement or Knowledge creation of the Undergraduate Women’s Experience

Title and description of proposed event:

Number of participants by subgroup:

Did you reach your target population and if not, why?

How did you assess your program and what were the outcomes?
  ➤ Please include your proposed learning outcomes or program goals, were they met, and if not, why?
  ➤ Do you consider the program a success and why?
  ➤ Do you have plans to implement the program again and if so will there be any changes and how do you plan to fund it?

What is the potential for institutionalization of the program, long-term impact, change, or best practice as a result of your event?

How will (or did) this program ultimately create a positive impact on the greater student body or campus?

Please describe the collaboration between all the co-sponsors.
  ➤ Who were the collaborators?
  ➤ What did you learn from this collaboration?
Did you experience any problems and if so how were they overcome?
Would you do it again?

Please provide a budget indicating how the funds were spent and account number so the funds to be transferred.

Do you have any comments or suggestions about the SIG program application process?