

CHANCELLOR INFORMATIONAL ITEMS

June 16, 2020

INFORMATION ONLY: Grant Applications and Awards

Board Policy 6024 requires the reporting of grant awards and applications to the Board as information, if they do not have a state maintenance of effort or future fiscal responsibility.

Chadron State Awards

- Small Business Administration NBDC (U.S. Small Business Administration) -- \$23,000
- Higher Education Emergency Relief Funds - CARES Act Student Funds (U.S. Department of Education) -- \$540,638
- Higher Education Emergency Relief Funds - CARES Act Institutional Funds (U.S. Department of Education) -- \$540,638

Peru State Awards

- Higher Education Emergency Relief Funds - CARES Act Student Funds (U.S. Department of Education) - \$413,672
- Higher Education Emergency Relief Funds - CARES Act Institutional Funds (U.S. Department of Education) -- \$413,672

Wayne State Applications

- Higher Education Emergency Relief Funds - CARES Act Institutional Funds (U.S. Department of Education) -- \$1,260,779
- Higher Education Emergency Relief Funds - Strengthening Institutions Program (U.S. Department of Education) -- \$123,516

Wayne State Awards

- Higher Education Emergency Relief Funds - CARES Act Student Funds (U.S. Department of Education) -- \$1,260,780
- Nebraska Business Development Center (U.S. Small Business Administration) -- \$73,000
- Nebraska EPSCoR Undergraduate Research Experience (National Science Foundation Infrastructure Grant) -- \$4,605
- John G. Neihardt Conference - *Youth Remembered, 1881-1901* (Humanities Nebraska) -- \$1,900
- Northeast Nebraska Growing Together Cooperative Education Scholarship Program (Aksarben Foundation) -- \$360,000

ATTACHMENTS:

- CSC Grant Award-NBDC (PDF)

- CSC Grant Award - HEERF CARES Students (PDF)
- CSC Grant Award - HEERF CARES Institutional (PDF)
- PSC Grant Award - CARES Act Student Grants (PDF)
- PSC Grant Award - CARES Act Institutional (PDF)
- WSC Grant Application Higher Ed Emergency Relief Fund Institution (PDF)
- WSC Grant Application - Higher Ed Emergency Relief Fund Strengthening Institution (PDF)
- WSC Grant Award-Higher Ed Emergency Relief Fund (PDF)
- WSC Grant Award-NBDC (PDF)
- WSC Grant Award-EPSCoR (PDF)
- WSC Grant Award-Humanities Nebraska (PDF)
- WSC Grant Award-Aksarben (PDF)

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Chadron State College		Date: June 16, 2020
Notice of Intent	Application: X	Accept Award: X
Name of Program: Small Business Administration NBDC		
Funding Source: U.S. Small Business Administration Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: X No:
If a sub-award, indicate the agency the sub-award is through: University of Nebraska at Omaha		
Amount Requested:	Amount Awarded: \$23,000.00	Funding Period: 1/1/20 to 12/31/20 Please indicate specific dates for the grant.
Closing Date for Application Submission: December 2019		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? No		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: X No:
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): \$16,606.00 of salary		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No:
How many FTE positions will the grant fund?		FTE: .5
How many of these are new positions?		New FTE: 0
Briefly describe the purpose(s) of this application/award: This award is for funding to continue the operation of a regional center of the Nebraska Business Development Center at Chadron State College. It provides partial funding for the .5 office assistant position and one graduate assistant including fringe benefits.		
Is this grant a continuation of a previous/existing grant?		Yes: X No:
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program: The program and funding period show no differences from prior years. The amount granted is the same as last year.		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Dr. Gary Dusek and Jennifer Wittrock		
Administrator responsible for approving the application: Dr. Randy Rhine		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Chadron State College		Date: June 16, 2020
Notice of Intent	Application: X	Accept Award: X
Name of Program: Emergency Financial Aid Grants to Students/HEERF/CARES		
Funding Source: U.S. Department of Education Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through: University of Nebraska at Omaha		
Amount Requested:	Amount Awarded: \$540,638	Funding Period: 5/6/20 to 5/5/21 Please indicate specific dates for the grant.
Closing Date for Application Submission: ASAP		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? No		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): \$16,606.00 of salary		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No: X
How many FTE positions will the grant fund?		FTE: 0
How many of these are new positions?		New FTE: 0
Briefly describe the purpose(s) of this application/award: This award is for funding to provide emergency financial aid to students affected by the COVID-19 pandemic.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program: The program and funding period show no differences from prior years. The amount granted is the same as last year.		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Kari Gaswick		
Administrator responsible for approving the application: Dr. Randy Rhine		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Chadron State College		Date: June 16, 2020
Notice of Intent	Application: X	Accept Award: X
Name of Program: HEERF/CARES Institutional portion		
Funding Source: U.S. Department of Education Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through: University of Nebraska at Omaha		
Amount Requested:	Amount Awarded: \$540,638	Funding Period: 5/12/20 to 5/11/21 Please indicate specific dates for the grant.
Closing Date for Application Submission: ASAP		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? No		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): \$16,606.00 of salary		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No: X
How many FTE positions will the grant fund?		FTE: 0
How many of these are new positions?		New FTE: 0
Briefly describe the purpose(s) of this application/award: This award is for funding to provide emergency financial aid to students affected by the COVID-19 pandemic.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program: The program and funding period show no differences from prior years. The amount granted is the same as last year.		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Kari Gaswick		
Administrator responsible for approving the application: Dr. Randy Rhine		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Peru State College		Date: June 16, 2020
Notice of Intent	Application:	Accept Award: X
Name of Program: CARES Act Student Grants		
Funding Source: U.S. Department of Education Also indicate if the source is federal, state or private Federal		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through:		
Amount Requested: \$413,672	Amount Awarded: \$413,672	Funding Period: 05/05/2020 – 05/04/2021 Please indicate specific dates for the grant.
Closing Date for Application Submission:		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board?		Date Approved/Reviewed: No
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: X No:
How many FTE positions will the grant fund?		FTE: 0
How many of these are new positions?		New FTE: 0
Briefly describe the purpose(s) of this application/award: This grant will provide funding to students impacted by COVID-19.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: VP Debbie A. White		
Administrator responsible for approving the application: President Dan Hanson		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Peru State College		Date: June 16, 2020
Notice of Intent	Application:	Accept Award: X
Name of Program: CARES Act Institutional Grants		
Funding Source: U S. Department of Education Also indicate if the source is federal, state or private Federal		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through:		
Amount Requested: \$413,672	Amount Awarded: \$413,672	Funding Period: 05/20/2020 – 05/19/2021 Please indicate specific dates for the grant.
Closing Date for Application Submission: 08/01/2020		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board?		Date Approved/Reviewed: No
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: X No:
How many FTE positions will the grant fund?		FTE: 0
How many of these are new positions?		New FTE: 0
Briefly describe the purpose(s) of this application/award: This grant will provide funding to reimburse the College for room and board refunds processed to students Spring 2020 due to COVID-19.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: VP Debbie A. White		
Administrator responsible for approving the application: President Dan Hanson		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Wayne State College		Date: June 16, 2020
Notice of Intent	Application: X	Accept Award:
Name of Program: Higher Education Emergency Relief Fund – IHE/Institution		
Funding Source: U.S. Department of Education Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through:		
Amount Requested:\$1,260,779.00	Amount Awarded:	Funding Period: 5/27/20-5/27/21 Please indicate specific dates for the grant.
Closing Date for Application Submission: September 30, 2020		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board?		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No: X
How many FTE positions will the grant fund?		FTE: 0.00
How many of these are new positions?		New FTE: 0.00
Briefly describe the purpose(s) of this application/award: This proposal would provide Wayne State College with funding, under the CARES Act, to reimburse itself for costs related to refunds made to students for housing and food service and other covid related expenses resulting from the disruption of campus operations due to the coronavirus.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program: While not a continuation, this is the second part of the Higher Education Emergency Relief Funds; the first half was requested for emergency financial aid grants to students.		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Ms. Angela Fredrickson, Vice President Administration & Finance		
Administrator responsible for approving the application: Dr. Marysz P. Rames, President Wayne State College		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Wayne State College		Date: June 16, 2020
Notice of Intent	Application: X	Accept Award:
Name of Program: Higher Education Emergency Relief Fund – Strengthening Institutions Program (SIP)		
Funding Source: U.S. Department of Education Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through:		
Amount Requested:\$123,516.00	Amount Awarded:	Funding Period: 5/27/20-5/27/21 Please indicate specific dates for the grant.
Closing Date for Application Submission: August 1, 2020		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board?		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No: X
How many FTE positions will the grant fund?		FTE: 0.00
How many of these are new positions?		New FTE: 0.00
Briefly describe the purpose(s) of this application/award: This proposal requests funds Wayne State College is eligible for under the Strengthening Institutions Program (SIP). These funds may be used to provide financial aid grants to students for expenses related to any component of the students' cost of attendance.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Ms. Angela Fredrickson, Vice President Administration & Finance		
Administrator responsible for approving the application: Dr. Marysz P. Rames, President Wayne State College		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Wayne State College		Date: June 16, 2020
Notice of Intent	Application:	Accept Award: X
Name of Program: Higher Education Emergency Relief Fund - IHEs		
Funding Source: U.S. Department of Education Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through:		
Amount Requested:\$1,260,780.00	Amount Awarded: \$1,260,780.00	Funding Period: 4/28/20-4/27/21 Please indicate specific dates for the grant.
Closing Date for Application Submission: September 30, 2020		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? No		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No: X
How many FTE positions will the grant fund?		FTE: 0.00
How many of these are new positions?		New FTE: 0.00
Briefly describe the purpose(s) of this application/award: This grant provides Wayne State College with funding to award emergency financial aid grants to students for expenses related to the disruption of campus operations due to coronavirus under the CARES Act.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Ms. Angela Fredrickson, Vice President Administration & Finance		
Administrator responsible for approving the application: Dr. Marysz P. Rames, President Wayne State College		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Wayne State College		Date: June 16, 2020
Notice of Intent	Application:	Accept Award: X
Name of Program: Nebraska Business Development Center		
Funding Source: U.S. Small Business Administration Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: X No:
If a sub-award, indicate the agency the sub-award is through: University of Nebraska at Omaha		
Amount Requested: \$73,000	Amount Awarded: \$73,000	Funding Period: 01/01/20-12/31/20 Please indicate specific dates for the grant.
Closing Date for Application Submission:		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? No		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: X No:
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): Matching funds of \$20,750 includes a portion of salary and benefits of the director as well as communications, supplies and travel expenses.		
Will this grant require In-Kind Support ?		Yes: X No:
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.): In-Kind support includes the College's indirect cost rate with the U.S. Small Business Administration.		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No: X
How many FTE positions will the grant fund?		FTE: 0.91
How many of these are new positions?		New FTE: 0.00
Briefly describe the purpose(s) of this application/award: This sub agreement with the University of Nebraska-Omaha provides funding to continue the operation of a regional center of the Nebraska Business Development Center at Wayne State College. The award provides partial funding for salary and benefit costs of the director.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program: While not technically a continuation, this subcontract continues to fund the Nebraska Business Development Center at Wayne as it has for a number of years.		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Mr. Loren Kucera, Director of Nebraska Business Development Center		
Administrator responsible for approving the application: Ms. Angie Fredrickson, Vice President, Administration and Finance		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Wayne State College		Date: June 16, 2020
Notice of Intent	Application:	Accept Award: X
Name of Program: Nebraska EPSCoR Undergraduate Research Experience		
Funding Source: National Science Foundation Infrastructure Grant Also indicate if the source is federal, state or private: Federal		
Is this grant a Sub-Award ?		Yes: X No:
If a sub-award, indicate the agency the sub-award is through: Nebraska EPSCoR		
Amount Requested:\$4,605	Amount Awarded: \$4,605	Funding Period: 4/1/20-3/31/21 Please indicate specific dates for the grant.
Closing Date for Application Submission: February 10, 2020		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? Yes		Date Approved/Reviewed: 04/23/2020
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: X No:
How many FTE positions will the grant fund?		FTE: 0.00
How many of these are new positions?		New FTE: 0.00
Briefly describe the purpose(s) of this application/award: This award will pay for costs associated with carbon -14 dating of lake sediment and chemical analyses of bedrock apatite grains of two lake sediment cores collected from the bottom of the deepest portion of the Loch Vale Watershed in Rocky Mountain National Park. Age-depth modeling software and identification of distinct chemical populations of the apatite will be performed using statistical cluster analysis by an undergraduate Wayne State College student. The mid-YDS (Younger Dryas Stadial - the most abrupt climate change in Earth's recent history) observed in this lake sediment is important to investigate because it is analogous to climate change related trends being observed there today.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Dr. Jason Price, Associate Professor, Physical Sciences and Mathematics Department		
Administrator responsible for approving the application: Ms. Angela Fredrickson, Vice President Administration & Finance		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Wayne State College		Date: June 16, 2020
Notice of Intent	Application:	Accept Award: X
Name of Program: John G. Neihardt Conference – <i>Youth Remembered, 1881-1901</i>		
Funding Source: Humanities Nebraska Also indicate if the source is federal, state or private State		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through:		
Amount Requested: \$1,900	Amount Awarded: \$1,900	Funding Period: 4/30/2020-10/22/2020 Please indicate specific dates for the grant.
Closing Date for Application Submission: March 1, 2020		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? Yes		Date Approved/Reviewed: 04/23/2020
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: X No:
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.): Wayne State College must provide at least half of the total project costs, either through cash or in-kind contributions. State matching funds of \$550 include publicity expenses and refreshments for the panel discussions.		
Will this grant require In-Kind Support ?		Yes: X No:
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.): In-Kind support includes the use of college facilities and the time commitment of several staff members.		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: X No:
How many FTE positions will the grant fund?		FTE: 0.00
How many of these are new positions?		New FTE: 0.00
Briefly describe the purpose(s) of this application/award: This award funds a conference to explore the history of Wayne, the Normal College (now Wayne State College) and the Midwest as detailed by John G. Neihardt, the Nebraska Poet Laureate in Perpetuity, in his last book. There will be panel discussions and lectures by various scholars from Nebraska that will bring a broader perspective of Neihardt's life and work. This award provides funding for an honorarium for four speakers and newspaper advertising of the event.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Dr. Meenakshi Dalal, Professor Emeritus		
Administrator responsible for approving the application: Ms. Angela Fredrickson, Vice President Administration & Finance		

NOTICE OF INTENT TO APPLY FOR, OR TO ACCEPT, AWARDS OF NON-STATE CONTRACTS OR GRANTS

College: Wayne State College		Date: June 16, 2020
Notice of Intent	Application:	Accept Award: X
Name of Program: Northeast Nebraska Growing Together Cooperative Education Scholarship Program		
Funding Source: Aksarben Foundation Also indicate if the source is federal, state or private: Private		
Is this grant a Sub-Award ?		Yes: No: X
If a sub-award, indicate the agency the sub-award is through:		
Amount Requested: \$360,000	Amount Awarded \$360,000	Funding Period: May 1, 2020-November 30, 2023 Please indicate specific dates for the grant.
Closing Date for Application Submission:		
When reporting Grant Award-- Has Grant Application been approved/reviewed by the Board? No		Date Approved/Reviewed:
Does this grant include Indirect Cost Funds for the College's use?		Yes: No: X
If yes, indicate dollar amount and/or percentage rate allowed:		
Will this grant require State Matching Funds ?		Yes: No: X
If yes, indicate dollar amount and specific uses of funds (i.e., salaries, honorariums, travel, office supplies, phone, postage, space rental, equipment, etc.):		
Will this grant require In-Kind Support ?		Yes: No: X
If yes, describe briefly (i.e., faculty release time, support personnel, use of office space, telephone, office supplies, etc.):		
Is State Maintenance of Effort or Future Fiscal Responsibility required?		Yes: No: X
If yes, describe briefly		
Are there restrictions imposed by regulation on claiming indirect costs?		Yes: No: X
How many FTE positions will the grant fund?		FTE: 0.00
How many of these are new positions?		New FTE: 0.00
Briefly describe the purpose(s) of this application/award: This award will provide funding to support the Northeast Nebraska Growing Together Cooperative Education Scholarship program at Wayne State College, a program to support workforce and economic development in Northeast Nebraska in which students will participate in a community of learners at Wayne State where they will receive a prescribed and accelerated curriculum that will arm them with the knowledge as well as the soft skills to work in a business during their senior year. The grant will be used to fund the scholarship program.		
Is this grant a continuation of a previous/existing grant?		Yes: No: X
If a continuation grant, describe the previous grant in terms of amount, funding period, and any differences in program:		
Has this grant application been previously denied?		Yes: No: X
If yes, please state the reason:		
Person responsible for the preparation of the application: Dr. Marysz Rames, President		
Administrator responsible for approving the application: Ms. Angie Fredrickson, Vice President Administration & Finance		