**Intent to Submit Proposal for**

**The Centers of Excellence Program**

**FY 2023-2024**

**I. Project Director Information**

 A. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 B. Project Director’s Academic Department and Institution

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 C. Briefly describe the qualifications of the Project Director for the proposed center including ***specific***

 ***expertise and related skills to the desired center topics***(*Word Limit 100*).

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 The project director’s CV must be attached to the Intent to Submit Proposal.

**II. Proposed Center Information**

1. Proposed Center of Excellence Name

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1. Provide a brief description of the area of focus of the proposed Center (*Word Limit 100*).

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**III. Please answer the following questions:**

1. Have you submitted the full or partial edition of the same proposal to a federal agency or another state agency?

Yes No

1. If “Yes” to Question III.A., has the proposal been funded?

Yes No

1. Do you intend to submit the same proposal to a federal or another state agency?

Yes No

1. Is the proposed center independent from other existing grant programs within the institution?

Yes No

1. Do you plan to partner with another higher education institution?

Yes No

**Please submit the form on or before December 15 via email to**

Dr. Lishu Yin (lyin@che.sc.gov)

Centers of Excellence Program (Teacher Education)

SC Commission on Higher Education

1122 Lady Street, Suite 400

Columbia, SC 29201

**Please note:** A required Technical Assistance Workshop for all “Intent to Submit”

 proposals received will be held at 2:00pm, Monday, December 18, 2023