



Office of Residence Life

Graduate Assistant Group Project Proposal

Proposed Program/Initiative Title:	Program Date/Duration:
Location:	Time:

Type of Program:

Professional Benefits of developing/enhancing program/initiative:

- 1.
- 2.

Learning Goals for the program:

- 1.
- 2.

Brief Description of the program:

Audience: ORL Staff University Students Open to Campus Community Other (please specify):

Potential Resources		
Item Needed	Estimated Cost	Source of Funding/Contribution

Identify an alternative to the proposal should resources (time, finances, etc) not provide for the requested above:

Brief description of alternative program:

Potential Resources		
Item Needed	Estimated Cost	Source of Funding/Contribution

Graduate Assistant Electronic Signature _____

Date _____

Graduate Assistant Electronic Signature _____

Date _____

Graduate Assistant Electronic Signature _____

Date _____

Note: this proposal is simply an outline of intended major initiative. Graduate Assistant will be responsible for submitting ongoing documentation to verify successful completion of major initiatives requirement. Proposal must be approved by Paraprofessional Coordinator BEFORE implementation