**PROJECT PROPOSAL - Your Innovative Idea Explained**

Complete this PDF and send it as a MIO attachment to Ashley Rankin with the title *LaunchBox Proposal* or drop it off in person to E-302 (within the Tutoring & Academic Success Centre).

**DEADLINE**

Though there is no set deadline, if you want to demo your project in May, you will need to submit this completed proposal by **October 10, 2018.**

**QUESTIONS**

Send a MIO to Ashley Rankin or visit her in person in E-302.

**A. OVERVIEW**

|  |  |
| --- | --- |
| Project Title |  |
| Category | **Check off THE category that best fits your project:**   * Making Vanier better * Improving the local community * Adding value or solving a problem for industry |
| Link to Video Pitch | **Video must be no longer than 5 minutes & can focus on any aspect of your idea.**  http:// |
| Date Submitted |  |
| Total Requested Budget | **This number must be taken from your budget section below.**  $ |
| **Project Leader** | |
| First Name |  |
| Last Name |  |
| Student ID |  |

**B. TEAM INFORMATION**

|  |  |
| --- | --- |
| **Team Member #1** | |
| First Name |  |
| Last Name |  |
| Student ID |  |
| **Team Member #2** | |
| First Name |  |
| Last Name |  |
| Student ID |  |
| **Team Member #3** | |
| First Name |  |
| Last Name |  |
| Student ID |  |
| **Team Member #4** | |
| First Name |  |
| Last Name |  |
| Student ID |  |
| **Team Member #5** | |
| First Name |  |
| Last Name |  |
| Student ID |  |

**C. COLLABORATOR(S)**

A collaborator can be a mentor, teacher, industry expert, a member of a community or group, or anyone that will help advance your idea.

Collaborators cannot be other Vanier students. **Each project requires at least ONE collaborator.**

|  |  |
| --- | --- |
| **Main Collaborator (required)** | |
| First Name |  |
| Last Name |  |
| Organization |  |
| Role in Project |  |
| Email Address |  |
| **Collaborator #2 (optional)** | |
| First Name |  |
| Last Name |  |
| Organization |  |
| Role in Project |  |
| Email Address |  |
| **Collaborator #3 (optional)** | |
| First Name |  |
| Last Name |  |
| Organization |  |
| Role in Project |  |
| Email Address |  |

**D. PROJECT DETAILS**

|  |
| --- |
| What problem or need is being addressed by this innovation project?  Which community or group of people is likely to benefit from this? |
|  |
| What has been attempted in the past to address this problem or need, and what are the barriers?  Do some research or speak to someone from the benefiting group. |
|  |
| What are the products, services, or laws that will be developed as a result of this project to help the benefiting group? |
|  |
| How would you share, promote, or market your idea to the benefiting group? |
|  |

**E. PROJECT SUMMARY**

Use your answers in the previous section D. PROJECT DETAILS to complete this section.   
This is an executive summary and should be written last.

|  |
| --- |
| Provide a concise description of what will be done in this project, who will do it, how long it will take, and if the project is coordinated with other projects or programs. |
|  |

**F. PROJECT BUDGET & RESOURCES**

NOTE: The budget you propose must be realistic based on the needs of your project. Although you are providing estimates, do your research. If your project proposal is accepted, the funding your team receives will largely be based on this section.

**Consider things like:** Travel, Materials, Equipment, Supplies, Software, etc.

|  |  |
| --- | --- |
| Item Description | Cost Estimate ($) |
| 1. | $ |
| 2. | $ |
| 3. | $ |
| 4. | $ |
| 5. | $ |
| 6. | $ |
| 7. | $ |
| 8. | $ |
| 9. | $ |
| **Total Requested Budget ($)** | $ |
| List any additional resources that you might need to bring your idea to life.  (e.g. equipment, persons with special expertise, etc.) | |
|  | |

**G. SIGNATURES**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Project Leader | Date Signed |
|  |  |
| Main Collaborator | Date Signed |

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**H. OFFICE FEEDBACK -- Do not complete this section!**

|  |  |  |  |
| --- | --- | --- | --- |
| * Accepted * Needs Improvement * Not Accepted | | | **Approved for:**  $ |
| Feedback / Comments / Suggestions | | | |
|  | | | |
|  |  |  | |
| LaunchBox Coordinator - **Ashley Rankin** | Date Signed | |