

**Los Angeles Harbor College
Student Success Coordinating Committee
Funding Proposal Abstract**

Project ID: (Assigned)		Project Title:
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Project Coordinator:		Total Dollar Amount Requested (Include a detailed budget)	
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PROVIDE A PROJECT DESCRIPTION (include project implementation time line):

Please indicate which targeted groups will be supported by this proposed project

Student Equity Plan: (specific goal{s}s or activity[ies]):

1. Access: _____
2. Course Completion: _____
3. ESL/Basic Skills Completion: _____
4. Degree/Certificate completion: _____
5. Transfer: _____

APPROVALS:

DIVISION CHAIR/MANAGER: _____	DATE: _____
DEAN: _____	DATE: _____
SSCC: _____	DATE: _____