Name of Faculty ________________________________
Rank and Department ____________________________
Year Started ________________________________
Received CABEC teaching improvement grant in the last 12 months? Yes__ No__
If Yes, Date Received and Grant Amount ________________________________
If yes, please also attach the final report from the previous CABEC grant.

I. Description and Purpose of the Teaching Improvement Activity
Include the name of the institution offering the course, published detailed course description, and the dates the course will be offered.
Please also attach the official course announcement and course description by the offering institution.

II. Courses currently teaching or description of a new course to be developed
III. Benefits to CBE and Proposed Measures to Evaluate the Benefits

IV. Funds Requested and Detailed Budget
   Please provide supporting document for each estimated budget item if available.

V. Time table showing time-line of teaching improvement activities

VI. Proposed Final Report Date

VII. Attach Current Curriculum Vitae

*Note that the proposal must be complete before it will be considered by the CABEC Board. If there is any information missing from the items above, the proposal will be automatically denied.