**2021-2022 Application Packet**

**APPLICATION DEADLINE: Friday, September 3rd, 2021**

**5:00pm**

*Incomplete applications will not be reviewed.*

**Application (this document)**

**Cost Estimates**

**Documentation of Loss History**

**Optional Materials:**

Photos, maps, plans, project timelines, and/or other relevant materials that support your proposal may also be included in this packet.

Submission Guidelines

* All applications and supporting materials should be submitted electronically (as attachments) and emailed to [bsas@berkeley.edu](mailto:calpartnershipfund@berkeley.edu)
* Proposals must explicitly demonstrate loss reducing strategies with SMART goals
* Incomplete proposals will not be reviewed
* All materials must be **received no later than 5:00pm on Friday, September 3rd, 2021**

Review Timeline (approximates)

September: Completed applications are reviewed by the Campus Risk Manager

October: Applications recommended by the Campus Risk Manager are reviewed by UC Berkeley senior leadership

November: Final recommended applications are reviewed by The Office of the President Office of Risk Services

December: Announcement of grant awards

January 2022: Funds are awarded to the chartstring provided

**2021-2022 Application Form**

|  |  |
| --- | --- |
| Project Name: |  |
| Applicant Name, Title: |  |
| Applicant’s Department Name: |  |
| Phone #: |  |
| Amount Requested: |  |

The process of identifying, analyzing, and selecting Be Smart About Safety projects, must include a review of your location loss history and hazards. Projects should be solidly based on statistical loss records or a defensible risk assessment**.**

**Short Project Description:** (Characters Limit **500**)

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A more detail project proposal may be added as an attachment but this information will be used in a report generated by UCOP. Do not only write “see attached”

**Attach cost estimates supporting the project proposal amount.**

**Is this department specific?**   Yes  No

**If yes, identify the department**

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**What are the unsafe conditions to be reduced or eliminated?**

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**Attach documentation of loss or injury history.** Examples include: police report, work orders, receipts, photos, assessments, etc.

**Loss or Injury Description:** Do not only write “see attached” (Characters limit **6000**)

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**Level of Probability of BSAS Proposal Achieving its Measurable Goal** (check one):

Slight – 30% or less

Moderate – 30% to 60%

High 60% or greater

**Estimated direct or indirect savings to be realized**

|  |
| --- |
| **$** |

**Continuation from prior year(s)?**   Yes  No

**Amount of funds spend from prior year’s proposal**

|  |
| --- |
| **$** |

**Measurable Goal:** Add one or more measurable goals for your proposal that meet the SMART criteria (S - specific, M - measurable, A - achievable R- realistic, and T - time-bound). These goals will be used to measure the success of your initiative. (Characters limit **6000**)

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**Estimated date to actually begin spending**

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| --- |
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**Will there be additional sources of funding?**  Yes  No

If yes, please list where from and how much:

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| --- |
|  |

**Dept ID and chartfield(s), if applicable, for where funds should be deposited**

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*Last Revised: 5/1/2021*