**2025-2026 Application Packet**

**APPLICATION DEADLINE: Friday, October 24th, 2025**

**5:00pm**

**Required Materials:**

[ ]  **Application (this document)**

[ ]  **Cost Estimates**

[ ]  **Documentation of Loss History**

[ ]  **Project Timeline**

[ ]  **Photos, Maps, Plans**

Submission Guidelines

* Request amount is capped at $50,000
* All applications and supporting materials should be submitted electronically (as attachments) and emailed to bsas@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, Friday, October 24st, 2025**

**2025-2026 Application Form**

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| --- | --- |
| Project Name: |  |
| Applicant Name, Title:  |  |
| Project Manager Name, Title:(if different from applicant) |  |
| Applicant’s Department Name: |  |
| Phone # and Email:  |  |
| 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**)

This short description should provide a clear and succinct executive level summary that describes the proposal and its scope. The short description will be used for generating annual reports about the BSAS program. A more detail project proposal may be added as an attachment, but do not only write “See attached”.

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**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**

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

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

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

**Measurable Goal and Timeline:** 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. Please also include a timeline to project completion**.** (Characters limit **6000**)

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**Estimated date to begin spending:**

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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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**Chart of accounts where funds should be deposited if grant is awarded:**

**[Dept ID] – [Function Code] –** [Chartfield(s)] (If applicable)

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*Last Revised: 4/2025*