

Grant Budget Start-Up Check List

Submit this form and all required documents to your Business Office for entry into PeopleSoft Financials (PSF). This checklist ensures proper setup, compliance and record-keeping for audit purposes.

Instructions: Complete **all** sections below and attach the required documentation. Incomplete submissions may delay budget entry and grant activation in PSF. Once loaded, PIs with access may view expenditures in Salesforce and PSF.

Required Documentation: (Attach/include with submission)	<input type="checkbox"/> Fully Executed Signed Contract <i>(signed by all parties)</i> <input type="checkbox"/> Subaward: must include underlying/original contract between Primary funder & Awardee <input type="checkbox"/> Official Award Notice OR CCCF Award Memo <input type="checkbox"/> Funder-Approved Budget (e.g., GATA, Amplifund, etc.) <input type="checkbox"/> Budget Load Worksheet (Must include Account Codes, Program Codes, + Class Codes) <input type="checkbox"/> Include Fringe Amounts and Indirect Cost Rate if applicable <input type="checkbox"/> Board Report (Resource Development Report - Section II with PD#) <input type="checkbox"/> Include Board Resolution for ICCB IGAs or Non-ICCB IGA <input type="checkbox"/> Cover Sheet from PeopleSoft <i>(generated by Business Office)</i>		
Grant Title: <i>(Given in Post-Award Kick Off, Follow CCC naming convention)</i>			
Funder: <i>(Receiving funds from, do not abbreviate.)</i>			
Subawards – Primary Funding Organization:			
PD #: <i>(Required, From RDR)</i>		Grant Awarded Amount*:	
Grant Start Date*:		Grant End Date*:	
Multi-Year? <i>(Method of distribution)</i>	No Yes, Annually Yes, One-time	Liquidation Date*:	
Grant Type:		In Direct Cost Rate:	
Funder Type*:			
Grantors Contract #*:			
CFDA Number*: <i>All Federal Awards Required</i>		CSFA Number*: <i>All State Awards Required</i>	
Grant Purpose:	Institutional Support Operation & Maintenance	Non-Instructional Public Service	Instructional Research
Competitive Grant?		Is rollover allowed?	
College:			
Lead College: <i>(if multi-college grant)</i>			
Departments/Subdivision: <i>(Enter code if known):</i>		Reporting*:	
Principal Investigator (PI):			
Co PI:			
Comments/Notes: <i>(Additional information pertaining to the budget, Explain Missing attachment)</i>			
PI Signature: <i>(No wet signature required)</i>			
Alternative Point of Contact: (Name & Email)			

For any questions or concerns please email us at grant-management@ccc.edu.

*The information entered must match the contract.

FY2026