

*Missouri Western State University*  
**Need Identification Form**

**Date:** \_\_\_\_\_

**Completed by:** \_\_\_\_\_  
*Name* *Title*

**Department:** \_\_\_\_\_

**Section I: Description of Project/Item**

Provide a brief description of the project/item for which funding is being requested.

**Section II: Needs Statement**

Briefly answer the following:

- Why the proposed project/item is necessary?
- What need or problem will be met or solved?
- Who will benefit from the project/item?
- What data do you have that supports the need?

**Section III: Budget**

Outline the costs associated with the project/item.

**Section IV: Donor Prospects**

List the names of individuals, businesses, and/or foundations you believe may have an interest in providing financial support the project/item.

[Empty box for donor prospects]

**Section V: Supporting Documentation/Materials (optional)**

List and attach supporting documentation or other materials that give credibility to your project such as statistical data, demographic information, biographies of key faculty/staff, equipment specifications, photos/renderings, etc.

[Empty box for supporting documentation]

**Section VI: Administrative Approval**

The signatures below signify that this is a legitimate funding need and is supported by the appropriate leadership. **This approval does not guarantee funding.**

Approved by:

\_\_\_\_\_ **Chair** (if applicable) \_\_\_\_\_ **Date**

\_\_\_\_\_ **Dean/Director** \_\_\_\_\_ **Date**

\_\_\_\_\_ **Provost/Vice President** \_\_\_\_\_ **Date**

.....  
*For Cabinet Use Only*

**Date Reviewed:** \_\_\_\_\_

**Prioritization Score:** \_\_\_\_\_

Priority Scale	
1	= Very High
2	= High
3	= Medium
4	= Low

**Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ **Robert A. Vartabedian, President**

\_\_\_\_\_ **Date**