

GDPR

General Data Protection Regulation

Campus Consortium

GENERAL DATA PROTECTION REGULATION
(GDPR) ASSESSMENT GRANT

Last Date to Apply: June 20, 2019

Email Completed Application to:
grantapplication@campusconsortium.org

(GDPR) ASSESSMENT GRANT OVERVIEW

First of its kind, Campus Consortium is proud to offer a competitive GDPR Assessment Grant in collaboration with its trusted technology partner as part of the Campus Consortium Grant Program. The grant helps fund up to \$20,000 in the entire process of assessment that includes:

1. An onsite visit.
2. Thorough audit.
3. Recommendation reports for vulnerability assessments under The General Data Protection Regulation.

In addition, Grant Awardees will also be eligible for Exclusive Consortium Rates to migrate their infrastructure to the cloud and be disaster ready.

**Auditor's travel and lodging will be hosted by the institution and will not be covered in the grant award.*

Note: A limited number of partial and full grants to be awarded. Interviews and technical assessment required of all applicants.

WHO CAN APPLY & WHAT IS THE QUALIFICATION CRITERIA?

- K-12 Schools and accredited institutions of Higher Education are eligible to apply.
- Previous awardees are eligible. Separate applications are required for each Grant pursued.
- Applicants are required to demonstrate institutional purpose in the form of a "letter of intent" signed by Dean/President or member of campus leadership team. The letter should indicate the challenges the solution aims to solve, and why the Grant would be helpful to the institution.

KEY GRANT APPLICATION DATES & DEADLINES

- Grant Application Due Date: June 20, 2019
- Review of Application by Grant Review Committee by: June 27, 2019
- Grant Applicant Interview and Technical Expert Session by: July 8, 2019
- Grant Award Letter Issued to Grant Recipients by: July 11, 2019
- Grant Award Walkthrough by: July 15, 2019
- Execution of Grant Award Agreement by: July 19, 2019
- Project Kick-Off by: July 31, 2019

HOW TO APPLY

1. Register for Grant and download application from
2. Print and complete the Grant application form
3. Submit completed Grant application to grantapplication@campusconsortium.org

General Information

Applicant Information

Name of Institution:			
President/Chancellor:			
Point of Contact (POC):			
Applicant/POC Phone:		Applicant/POC Title:	
CIO/VP of IT:			
CIO Phone:		CIO Email:	
Institution's Address:			

IN THE CASE OF BEING AWARDED THIS GRANT:

1) Do we have your permission to email the grant award letter to the President/Chancellor listed above?

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2) If not, please indicate to whom this award should be made out to:

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3) Media/Communications Contact (for News Release):

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Name:		Email:	
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ENROLLMENT INFORMATION

Total Enrollment:		Full Time Enrollment:		Part Time Enrollment:	
Total # On-Campus Students:		Total # Online Students:		Total # International Student enrollment:	
# Faculty:		# Tenured Faculty:		# of Academic Depts.:	
Alumni Population:		% of Alumni who Donate:			

PLEASE MARK "X" NEXT TO ALL THAT APPLY

Public:		Private:	
Four-year:		Two-year:	
Undergraduate:		Graduate:	

TECHNOLOGY RESOURCES

Please indicate all major software being utilized on campus

Enterprise Applications	Vendor & Version	Annual Cost to Institution	Target Date to Upgrade or Replace

1) Student Information System (SIS)			
2) Recruiting/CRM System			
3) Financial Aid:			

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1) How did you hear about this Grant?

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2) Please provide a complete list of applications in use on the campus.

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3) Please confirm if Medical or Credit Card related information is stored on campus.

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4) Are all information systems inventoried, and are the data owners documented?

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5) Has a risk assessment ever been conducted at your institution and when?

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6) Please provide the exact number (with details) of the number of servers and desktops in your environment.

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7) How many physical locations are we assessing for your institution?

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8) Are there any systems that are controlled by a third-party (SaaS, IaaS, etc), where risk assessments are already performed and would be outside the scope of this assessment?

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9) How many systems do you want to perform a Data Protection Impact Assessment (DPIA)?			
10) How many EU Students or Employees are attending/employed at the institution?			
11) Why do you feel your institution should be selected for this Grant?			
12) If selected, what are your timeline for implementing this project?			
SIGNATURES			
I verify that the information provided on this form is accurate.			
Signature of applicant:		Date:	

Email Completed Application by June 10, 2019 to: grantapplication@campusconsortium.org

