



Campus Consortium

SOC as-a-Service Grant

Last Date to Apply: August 26, 2019

Email Completed Application to:
grantapplication@campusconsortium.org

SECURITY OPERATIONS CENTER-as-a-Service GRANT OVERVIEW

The Security Operations Center-as-a-Service Grant provides selected institutions a grant award up to **\$50,000** over a period of five years. The Grant is intended to cover the cost towards licensing, hosting, professional services, and support costs associated with implementation of the platform.

Note: A limited number of partial and full Grants to be awarded. The in-kind Grants for software and services supported by select Campus Consortium Technology Partner Vendors are designed to provide a variety of solutions, products, and services, to help Institutions reduce costs while implementing the latest technologies on campus. 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: August 26, 2019
- Phone Interview with Grant Application Review Committee by: September 2, 2019
- Grant Applicant Interview and Technical Assessment Session by: September 9, 2019
- Grant Award Letter Issued to Grant Recipients by: September 16, 2019
- Grant Award Walkthrough by: September 23, 2019
- Execution of Grant Award Agreement by: September 24, 2019
- Project Kick-Off by: October 7, 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:			
President/Chancellor Email:			
Point of Contact (POC):			
POC Phone:		POC Email:	
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?			
2) If not, please indicate to whom this award should be made out to:			
3) Media/Communications Contact (for News Release):			
Name:		Email:	

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	Primary Vendor	Annual Cost to Institution	Is your campus looking to replace this system in the near future?
Number of Servers			
Number of IOT devices			
Number of Storage Arrays			
Number of Network Devices			
Number of End Points			
Other Critical Campus Applications (Please add the rows if you have more applications)			

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1) How did you hear about this grant?

2) Does your institution currently have any Threat Event Management / Log Aggregation tool on premise, If so please let us know?

3) Please provide us brief insight into the IT infrastructure architecture of the campus, If possible a HLD (High Level Diagram) would be good.

4) What are your major challenges that you are facing as far as Security and Threat Identification of infrastructure is concerned.

5) What are your requirements on compliance framework?

SIGNATURES

I verify that the information provided on this form is accurate.

Signature of applicant:

Date:

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