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**SoTL Grant Closure Report   
(20xx – 20xx)**

1. **Basic Information**

Title of Project:

**Investigator(s) Information**

**Principal Investigator:**

Name:

College:

Department:

Phone Number:

Email Address:

1. **Project Update**

Research Question

Progress Report

Impact

Dissemination

1. **Expense Report**

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenditure** | **Amount Requested** | **Amount Spent** | **Notes** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | **Total** | **Total** |  |
|  |  |