**FORM APPROVED**

**2. ACTIVITY TITLE:**

**4. PRIMARY**

**PARTICIPANTS**

**5. METHODOLOGY**

**6.**

**TANGIBLE RESULTS**

**7. TIMEFRAME**

**FROM TO**

**3.**

**SPECIFIC TASKS TO BE COMPLETED**

**GRANT APPLICATION FOR THE**

**HISTORICALLY BLACK COLLEGES AND UNIVERSITIES AND**

**HISTORICALLY BLACK GRADUATE INSTITUTIONS PROGRAMS**

**IMPLEMENTATION STRATEGY AND TIMETABLE FORM**

**1. Name of Applicant Institution:**

**OMB Control Number: 1894-0008**

**Expiration Date: 09/30/2030**

**(Allowable )**

**University of Arkansas at Pine Bluff-Year : FY**

**Objective 1**