

APPLICATION FORM

FACULTY SUMMER SCHOLARSHIP FUND

Please type or print in black ink and return to Linda Reedijk in Eliot 317.

Name _____ Date _____

Please check tenure-track tenured continuing visitor

NOTE: Limit of \$1,500 for tenured and tenure-track faculty and \$1,000 for visitors

Title of project _____

Starting date and duration of project _____

Brief summary of activities for which your are requesting support (use additional space if needed):

BUDGET REQUEST

	Description of item	Amount
Purchases		
Books, tapes, records	_____	_____
Computer software	_____	_____
Computer hardware	_____	_____
Supplies	_____	_____
Wages		
Student	_____	_____
Non-student	_____	_____
Travel		
Airfare	_____	_____
Living expenses	_____	_____
Miscellaneous		
Fees	_____	_____
Printing, photocopying	_____	_____
Other (please explain)	_____	_____
	TOTAL REQUESTED:	_____

Other funds available to support this project: Amount: _____ Source: _____