
SCIENCE INSTITUTE APPLICATION FORM

CHECKLIST (to be included with application) APPLICATION FORM

SCIENCE INSTITUTE APPLICATION FORM

1. Project Director: _____

Campus Address: _____

Campus Phone: _____

Project Associate(s): _____

2. Field(s) of Applicant(s): _____

3. Type of Submission: _____ Curriculum Development
_____ Faculty Development
_____ Student Development
_____ Faculty/Student Research
_____ Event
_____ Other

4. Type of Application: _____ New
_____ Resubmission
_____ Renewal

5. Time Period for Expenditure of Fu12 0 1u1000912 0 612 792 r 0 0 1 285.05 267.17 Tm0 g0 G[)JTL3

BUDGET SUMMARY

Title of Project: _____

CATEGORY

**AMOUNT REQUESTED
FROM SCIENCES INSTITUTE**

1. PERSONNEL: (Stipends) \$ _____

2. TRAVEL: \$ _____

3. SUPPLIES: \$ _____

4. EQUIPMENT \$ _____

5. RENTAL \$ _____

6.. OTH Tm 252(:)TETQq02 612 2 re WBT/F1 12 Tf1 01 165534 6297Tm(G)TETQq02 612 2 re WBT/F1

BUDGET NARRATIVE

1. PERSONNEL:

2. TRAVEL:

3. SUPPLIES:

4. EQUIPMENT PURCHASE:

5. RENTAL:

6. OTHER: