

Summer Funding for Collaboration in the Humanities

2006

Cover Sheet

Project name: _____

Name, campus or U.S. address (including zip codes), phone numbers and email addresses of each member of your group.

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

Designate a member of your group to whom communications, including the outcome of this application, should be sent. This person will be responsible for sharing any communications with all the other members of your group.

Designated communicator _____