Experiential Learning Fellowships for Undergraduates in the Arts, Humanities, and Social Sciences APPLICATION REQUIREMENT: COVER SHEET (Please save this form as a Word document)

APPLICATION FOR THE ROCKS AND TRAUB FUNDS

Check to which fund you are applying: ___Rocks __Traub Student Name: **Email Address:** Telephone Number: Campus Address: Declared Major 1: Declared Major 2: Declared Minor 1: Declared Minor 2: Expected Graduation Date (month/year): Title of Project: Project Begin and End Dates: (day/month/year): Is this funding being requested to support your junior year abroad travel? (yes/no): (A student may not use this fellowship to fund travel for a junior year abroad unless a specific project proposal has been submitted through this application process and selected by the faculty selection committee.) Total Funding Amount Requested: \$ **Check one:** I waive my right to inspect my faculty sponsor's letter of recommendation. ____ I **do not waive** my right to inspect my faculty sponsor's letter of recommendation. Name printed or signature_____