

APPLICATION TO THE STUDENT GRANT PROGRAM
CENTER FOR INTERDISCIPLINARY AND SPECIAL STUDIES
COLLEGE OF THE HOLY CROSS

Name _____

Class _____

P.O. Box _____

Major _____

Telephone No. _____

Soc. Sec # _____

Student ID# _____

Please provide a narrative of 1 - 2 pages in response to the information requested below.

Describe your request (travel, research, performance costs, etc). Be sure to indicate briefly the ways in which your request relates to or supports your academic program of study (e.g. your major, minor, concentration, Honor thesis, etc.)

Provide a budget. Give specific dollar amounts for each item listed.

3. List any other funds which you have already received or for which you have applied (If you are a student working with a faculty mentor, please request him/her to send a brief statement regarding the availability of other sources of support.)

In addition, please provide a letter of support from one faculty member familiar with your request.

APPLICATIONS ARE DUE IN 12 COPIES BY February 11, 2005.