

INDIANA CONSORTIUM FOR INTERNATIONAL PROGRAMS (ICIP)

Check Sheet for ICIP Grant Applications

To be complete by institutional ICIP board representative or alternate

This form **MUST** be attached to the front of the application.

1. Project Title _____
2. Name of Applicant _____
3. College/University _____
4. Date(s) of Project _____
5. Type of Project (check one)
Institutional
_____ Conference/Seminar
_____ Consultation
_____ Speakers Bureau
Individual
_____ Faculty Development
6. Funding:
Amount of funds committed from applicant's institution \$ _____
Amount of funds requested from ICIP \$ _____
Amount from other sources (specify) \$ _____
TOTAL BUDGET (transfer total from budget sheet) \$ _____
7. Materials included in application
_____ This cover sheet
_____ Narrative description of project
_____ Budget
_____ Curriculum Vitae or pertinent biographical material for
_____ Letter of endorsement from appropriate institutional official
_____ **TEN** copies of the complete proposal (in addition to the original)

To the best of my knowledge, this proposal fits ICIP's grant guidelines.

Signature of Board Member or Alternate

Date