

AVPA Student Arts Enhancement Grant Cover Sheet

Title of Project: _____

Projection Description (150 words):

Name of Applicant: _____ UIN: _____

Email: _____

Degree Currently Seeking: _____ Dept: _____

Have you received this grant in the past? Yes No

If "Yes" please provide date and amount awarded: _____

Faculty Advisor: _____

Mail Stop: _____

Phone: _____

Email: _____

Amount Requested: _____

Student Investigator Signature

Date

Faculty Advisor Signature

Date

Department Head Signature

Date

Submit completed application (Cover Sheet, Project Description, CV, Letter of Support, Involvement with AVPA, and Budget) electronically as a PDF to the AVPA Program Coordinator (avpa@tamu.edu)