

FACULTY SCHOLARSHIP DEVELOPMENT GRANT APPLICATION

Associated Mennonite Biblical Seminary

DATE: _____ Year of Grant: _____

1. Name _____

2. Amount of Funds Requested _____

3. List specific objectives of and rationale for the project.

4. What steps, methods or procedures will you use to accomplish these objectives?

5. What is your proposed timetable for the project?

6. Itemize the budget for your project noting what you will use the scholarship development funds for.

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7. How do you hope to share the results/benefits of your project with others?

8. I will report to the Dean on the status of my project, including financial accounting by _____(date).

Signature of applicant Date

Signature of Dean Date

Faculty Scholarship Development Committee Approval Date

Amount of Grant _____ Acct: 225-2162