

Hunter College
2014 Presidential Fund for Faculty Advancement
Application Cover Sheet

Name: _____

Department: _____

Rank: _____

Tenured: Yes _____ No _____

Telephone: _____

E-Mail: _____

Please indicate your acceptance of the program requirements by initialing the following two statements:

_____ If funded, the items/services I have requested will be purchased and used for a new or continuing research, scholarship, or creative project during the period of January 1, 2014 – December 31, 2014.

_____ If funded, the requested items/services will be used for a new or continuing research, scholarship, or creative project that will be submitted for publication or as part of an external grant proposal by December 31, 2015.

Applicant Signature

Department Chair Signature