

VALDOSTA STATE UNIVERSITY

Application Form For
Externally Supported Individual Awards

Directions: Please complete all the items on this form, attach a recent curriculum vitae, and return to the Office of Grants and Contracts after you have obtained the required signatures. Please type.

1. Name:
2. Academic/Administrative Unit:
3. Rank or Position Title:
4. Social Security Number:
5. Passport Information: Number _____ Date of Issue _____ Expires _____
(for international projects only)
6. Campus Telephone: _____ 7. Home Telephone: (_____)
8. Dates/Interval of Proposed Activity:
9. Funding Agency _____
10. On a separate sheet, please briefly describe your proposed activity. Attach a copy of your proposal.
11. How will your duties at Valdosta State be covered during your absence?

12. For international projects, please list and briefly describe previous international experience.

Approval is granted for this person to participate in the FUNDED INDIVIDUAL ACTIVITY described in the attachment.

for the period from _____ to _____.

SIGNED:

Department Head

DATE

Dean/Supervisor

DATE

Director of Grants and Contracts

DATE

**Director of International Programs
(for international projects only)**

DATE

Vice President for Academic Affairs

DATE