



Evolving Earth Foundation Grant Application

Organization Information:

Name of Sponsoring University/Organization _____

Address _____

City _____ State _____ Zip _____

Grant Administrator Name/Title: _____

Phone Number _____ E-Mail _____

Applicant Information:

Name/Title _____ Phone Number _____

E-Mail _____ Fax Number _____

Mailing Address (if different than above) _____

City _____ State _____ Zip _____

Educational level of student investigator - Undergraduate: M.S. Candidate: PhD Candidate: Postdoc:

Title of Project: _____

Brief Description of Project: _____

Project Start Date: _____ **Project End Date:** _____

Total funding requested from foundation \$ _____

Name and Title of Authorized Officer _____

Signature of Authorized Officer _____ **Date** _____

This signature indicates that the sponsoring institution believes the principal investigator is qualified to conduct the project, and the institution agrees to accept overall responsibility for the project if a grant is awarded. The project is to be conducted in accordance with the grant proposal and the Evolving Earth Foundation grant award conditions.

Signature of Principal Investigator _____ **Date** _____