

Hurford Humanities Center
Residency/Symposium/Event/Mellon Planning Application Form for 2011-12
http://www.haverford.edu/HHC/for_faculty/index.php

This page is a summary of your grant application and must be submitted by all those who apply for Humanities Center grants for curricular development. This form should come with your accompanying proposal materials. Due dates: Friday, October 21st, 2011 by 5 p.m. Next deadline is Friday, March 30th, 2012 by 5 p.m. Send to Emily Cronin (*ecronin*), Hurford Humanities Center, Stokes 103.

I. PRINCIPAL AUTHOR OF APPLICATION

Name: _____
Phone: _____ E-mail: _____

Organization represented (if any): _____

II. WHO AND WHAT?

Kind of grant (enter corresponding number from below): _____

- | | |
|---------------------------|-----------------------------|
| 1. Access Grant | 6. Performing Arts: Theatre |
| 2. Talk or Reading | 7. Exhibition |
| 3. Talk or Reading Series | 8. Film Screening |
| 4. Performing Arts: Music | 9. Film Series |
| 5. Performing Arts: Dance | 10. Mellon Residency |
| | 11. Symposium |

Note: To apply for curricular development funds (Access Enrichment, Course Innovation or Renovation, or Course Enhancement Grants; a grant from the Tuttle Fund for Development of Visual Culture Across the Curriculum; or a Summer Curricular Institute), our other application form.

Title of Event: _____

Description of Event including: Names of speakers/performers/participants, their affiliations, your goals for this event and a description of how you see it being presented at Haverford, who might make up the audience for the event, an explanation on how the honorarium was determined. Attach additional sheet if necessary.

Capsule Description of Main Event (*Please fit into this space*):

Capsule Description of Other Activities (i.e. workshops, demonstrations, etc.):

List of Supporting Documents Provided (résumés, syllabus for any related course, full description of event, explanation of connection with the curriculum and/or with other departments or disciplines, etc.); for both visual and performing arts proposals, please provide slides, digital images, script samples, DVD's, reviews, tapes, or any other helpful evidence about the nature and the quality of the work.)

III. WHEN & WHERE

Proposed Date(s): (Please provide alternate dates if possible; if not, please let us know.)

N.B. HHC cannot sponsor events held on Family Weekend or Alumni Weekend.

Proposed Venue: _____

Have you checked on its availability or made a room reservation? _____

IV. BUDGET SUMMARY

Please itemize the cost for each category; provide a per-person breakdown in the proposal narrative, including details on modes of transportation and points of origin. Round all figures to the nearest \$10.

Requested from HHC/ Other Source

Honoraria for Speaker(s)/Performer(s) Total: _____ / _____ <i>For visits involving several activities, please itemize costs for each activity reflected in the honorarium.</i>

Travel & Transportation Costs (total):	_____ / _____
Lodging Costs:	_____ / _____
Location: _____	
<i>(Write in Campus Center and # of rooms, if tentative reservations have been made; otherwise, name hotel/motel and amount)</i>	
Hospitality: Reception following event:	_____ / _____
Hospitality: Meals for Speaker(s)/Performer(s)	_____ / _____
<i>(Please estimate numbers.)</i>	
Symposium Attendees:	
<i>(Please estimate numbers.)</i>	
Technical Requirements:	_____ / _____
Event Staffing required (# of people needed and hours):	
Other total:	_____
TOTAL AMOUNT REQUESTED FROM THE HUMANITIES CENTER:	_____ / _____
<i>The Humanities staff will provide support for determining the budget expenses if such help is needed.</i>	

Please note: Haverford College will not honor per diem requests.

V. NAME(S) OF EVENT SPONSORS

If multiple departments/organizations/groups are sponsoring this event, the responsible party from each group should sign here; provide e-mail and phone numbers for each person.

Name: _____
 Group Represented: _____
 Tel: _____
 E-mail: _____

Name: _____
 Group Represented: _____
 Tel: _____
 E-mail: _____

Name: _____
 Group Represented: _____
 Tel: _____
 E-mail: _____

