HARWARD CENTER FOR COMMUNITY PARTNERSHIPS

Helen A. Papaioanou Service-Learning Grant

APPLICATION COVER PAGE

Name: ____________________________ E-mail: ____________ Class: ______

Campus Mail: ________________________ Campus Phone: __________

Course, Short Term Unit, or Project for which funds are sought: __________________________

Amount of funding requested: __________________________
  • maximum for service-learning project—$100 per individual
  • Funds paid as reimbursement through original receipts.

What other funding has been applied for or received to support this project?

_________________________________________________________________________

Faculty Endorsement: By signing this form, I endorse this project and I am willing to supervise this student’s service project as described.

Signature of faculty: _______________________________________

Print name: ________________________________________________

Faculty Comments:

Application must include:
  • Completed cover page
  • Explanation of the service-learning project that Papaioanou funds will support including:
    o Description of the project
    o The agency where you will be working
    o The service your work will provide
    o How the work relates to your course of academic study
  • A budget of your expenses
  • Letter of support from community partner (optional)

Please limit your remarks to one page maximum. Applications are accepted on a rolling basis as long as funds remain available. Please submit your application to the Harward Center for Community Partnerships at 161-163 Wood St.

Applicant signature: ____________________________ Date: ____________________________

8/2006