

GEC Summer Grant Endorsement Form

Attachment B

Please include all relevant information, adjusting the form as necessary

1. Proposal Title:
2. Cluster:
3. Date of Proposal Submission:
4. Date of Grant Report Submission:
5. Abstract or Purpose:

Name	Signatures
Grant Director/s:	
Name:	
Department/School:	
Name:	
Department/School:	
Name:	
Department/School:	
Department Head/School Director:	
Dean:	