

Date: _____

Project Director _____

Department _____

Campus Address _____

Campus Telephone _____

E-mail Address _____

BU ID# _____

**Publication Costs for Faculty in the Humanities Awards
Rolling deadline, applications accepted at any time**

Project Title: _____

Project Abstract: (about 250 words)

Applicants must submit a letter from the press and a letter of support from your department/program chair/director. A budget outline should also be submitted with this cover sheet.

Project Costs: Request from Foundation: \$ _____

Contributions from Other Sources: \$ _____

Total Project Costs: \$ _____

Project Period: From _____ - _____ - _____
Month Day Year

To _____ - _____ - _____
Month Day Year

Signatures:

Project Director

Department Chair or Center manager

Director of Humanities Foundation

Approved _____ Denied _____

Please send this application and your supporting materials to:
Christine Loken-Kim The Humanities Foundation, 725 Commonwealth Avenue, CAS 107
617- 358-6251 lokenkim@bu.edu