

## Provost's Faculty Research Fellowship Cover Sheet

Date:

Date:

## **Applicant Information** Title/Rank: Name: Date Employed: College: Department: **Total Amount Requested: Buyout Requested:** Fall 2019 Spring 2020 **External Fellowship Information** Name of Award/Fellowship/Funding Agency/Source: Application Deadline for External Fellowship: Fellowship Period, if available: From: To: When will the external fellowship award be announced? **Required Signatures** Date: Applicant's Signature:

All application materials should be emailed as one file attachment to OFAawards@gsu.edu by November 30, 2018.

Cover sheet

Dean's Signature:

- Proposal
- Budget
- Curriculum Vitae

Department Chair's Signature: