

JACOBS RESEARCH FUNDS

Whatcom Museum

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www.jacobsgrants.org

jgrant@cob.org

See guidelines for instructions and submission information.

Date: ⇐	
Title of project: ⇐	
Name: ⇐	SSN (or SIN):
Address: ⇐	Phone: Email:
Period of proposed research (start, end dates): From to	
Total requested from Jacobs Fund (indicate USD or CAD): \$ USD	
<p>Type of grant applied for (select one):</p> <p><input type="checkbox"/> Individual Grant [\$3000 USD or \$3300 CAD maximum]</p> <p><input type="checkbox"/> Group Grant (2 or more researchers) [\$6000 USD or \$6600 CAD maximum]</p> <p><input type="checkbox"/> Kinkade Grant [\$9000 USD or \$10,000 CAD maximum]</p> <p>If you are applying for a Kinkade Grant and it is not awarded, do you want to be considered for an Individual grant? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>For Group Grants, list names, addresses, and e-mail addresses of all other researchers (attach additional sheet if needed):</p>	
<p>Sponsor/references (name, position, address, e-mail address). Check box if sponsor.</p> <p><input type="checkbox"/></p> <p>_____</p> <p>_____</p>	
Previous Jacobs Fund grants received, if any (year of award, topic, date that final report was filed, date and location that field materials were archived):	

Name:

A. Short CV (2 pages maximum)

←

Name:

B. Description of proposed activity (3 pages maximum)

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Name:

C. Budget summary, budget justification, & other support (1 page maximum)**Budget summary:**

Consultant fees	\$
Supplies	
Travel and lodging	
Archiving	
TOTAL REQUESTED	\$ USD

Budget justification:**Other support (from non-Jacobs Fund sources):**