RURAL EDUCATION INSTITUTE OUTREACH GRANTS

COVER SHEET

1. Name(s) ____________________________________________________________

2. Department/Program Area ____________________________________________

3. Project Title _______________________________________________________

4. Budget Request (specify amount) _______________________________________

5. Project Summary (Please provide a brief summary, in no more than 50 words, of the project or request.)

6. Project Starting and End Dates: ______________ to ______________

7. Signatures:

__________________________________________________
Department Chair       Date

__________________________________________________
Director of Teacher Education       Date