

Supplementary Cover Sheet for NEH Grant Programs

1. Project Director

* Major Field of Study G3: American Studies

Prefix	* First Name	Suffix	Middle Name
* Last Name			
Title			
* Organization Name			
Department		Division	
* Street1			
Street2			
* City	County	* State	* Zip Code
E-Mail	* Phone Number		Fax Number
* Is Above information your Home or Work Address? Work			

2. Institution Information

*Type 1326: Center For Advanced Study/Research Institute

*Status Private Non-Profit

3. Project Funding

Programs Other than Challenge Grants

Outright Funds	\$0.00
Federal Match	\$0.00
Total from NEH	\$0.00
Cost Sharing	\$0.00
Total Project Costs	\$0.00

Challenge Grants Applicants Only

Fiscal Year #1	\$0.00
Fiscal Year #2	\$0.00
Fiscal Year #3	\$0.00
Total from NEH	\$0.00
Non-Federal Match	\$0.00
Total	\$0.00
Matching Ratio	9.99 to 1

4. Application Information

* Will this proposal be submitted to another NEH division, government agency, or private entity for funding?	✓ Yes No	* If yes, please explain where and when:
* Type of Application	New ✓ Supplement	* If Supplement, list current grant number(s).
* Project Field Code	G3: American Studies	
* Project Description		

5. Institutional Grants Administrator

Prefix	* First Name	Suffix	Middle Name
* Last Name			
Title			
* Organization Name			
Department		Division	
* Street1			
Street2			
* City	County	* State	* Zip Code
E-Mail	* Phone Number		Fax Number
* Is Above information your Home or Work Address? Work			