

# Application Cover Sheet

HRI Summer Faculty Fellowships 2026

**Please indicate the category of support you are applying for (CHOOSE ONE):**

**Research (\$3K)**

**Course Development (\$2K)**

**Name:**

**Rank/Title:**

## **Department/Unit Information**

Please enter the department/unit(s) in which you have a percentage appointment, indicating the percentage as appropriate.

**Department/Unit**

**Appointment %**

**Campus Address:**

**Mail Code:**

**Email Address:**

Department where funds will be housed:

## **Department Business Contact Information:**

Name:

Email:

Phone: