Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Applicant(s) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If multiple applicants who is the lead applicant for the grant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please use the following questions and check boxes to assure that your grant application is complete (incomplete applications will be returned un-reviewed):

Grant being applied for:

[x]  OAC grant (maximum of $1,000.00)

[x]  Essenpreis grant (maximum of $1,500.00)

Purpose of Grant (check all that apply):

[x]  Academic research

[x]  Exhibit

[x]  Preservation

[x]  Publication/pre-publication

[x]  Material/laboratory analysis

[x]  Salvage

[x]  Dating (e.g., radiocarbon, OSL, etc.)

Key Personnel:

[x]  Attach curriculum vitae for each applicant and information about the capabilities of any outside analysts to be used in the grant.

Research Goals:

[x]  Attach a copy of the research proposal (suggested 1-3 pages with 5 page limit).

* + Describe the purpose, methods, and work plan for the proposed project.
	+ How will this project enhance our understanding of Ohio archaeology?
	+ What will be the outcome or end product?
		- OAC grant recipients are required to present the results of their grant to the OAC membership.

If this request is for radiocarbon, other types of dating, or materials or laboratory analysis:

[x]  Describe the material sampled, provenience or context, and any associated artifacts.

 [x]  Is the analysis destructive

or

 [x]  Is the analysis non-destructive?

If this request is for support of a salvage project, describe the threat to cultural resources:

[x]  Include the name of the site, site number (if available), and property-owner's name and address.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Is this project:

[x]  Local

[x]  State

[x]  Federal government

[x]  Has any portion of this project been funded as a contract?

When and how will the grantee present the results of the OAC funded research to the membership?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Sources of Funding:

[x]  Identify other funding sources supporting this project and indicate the date when those funds were approved for this project.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[x]  If not yet approved, note that funding is "pending" and indicate the date when the determination will be made.

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Use the following to summarize proposed expenditures.

|  |  |  |  |
| --- | --- | --- | --- |
| **Expense Category** | **Request from OAC** | **Other Funding** | **Total** |
| Personnel |  |  |  |
| Supplies & Materials |  |  |  |
| Permanent Equipment |  |  |  |
| Production/Exhibit  |  |  |  |
| Photography |  |  |  |
| Outside Fees & Services |  |  |  |
| Radiocarbon Date |  |  |  |
| OtherA |  |  |  |
| Travel--Personnel |  |  |  |
| Shipping |  |  |  |
| Operating--Postage |  |  |  |
| Operating--Photocopy |  |  |  |
| Operating--Telephone |  |  |  |
| Operating--Other |  |  |  |
| TotalsB |  |  |  |

ADescribe on separate sheet BMaximum OAC grant is $1,000; Essenpreis grant maximum is $1,500

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
|  |

FOR OAC GRANTS COMMITTEE USE

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Sent for Review: \_\_\_\_\_\_\_\_\_\_\_\_

Applicant's OAC Membership Status:

[x]  Associate

[x]  Active

[x]  In Good Standing

Application:

[x]  Approved

[x]  Not Approved

State reason(s) for disapproval on separate sheet

Application Reviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_