

THE EISENHOWER PRESIDENTIAL LIBRARY
ABILENE TRAVEL GRANTS PROGRAM
PLEASE TYPE OR PRINT

PERSONAL INFORMATION:

NAME: _____
(Last) (First) (M.I.)

DATE OF BIRTH: ____/____/____ CITIZENSHIP: _____

HOME ADDRESS: _____
(Street) (Apt. No.) (City) (State) (Zip Code)

WORK ADDRESS: _____

(Street) (Apt. No.) (City) (State) (Zip Code)

HOME TELEPHONE (____)____-____ WORK TELEPHONE (____)____-____

E-MAIL _____

EDUCATION:

INSTITUTION

DEGREE

DATE AWARDED

<u>INSTITUTION</u>	<u>DEGREE</u>	<u>DATE AWARDED</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT: CURRENT POSITION OR OCCUPATION: _____

INSTITUTIONAL AFFILIATION, IF ANY: _____

PRODUCT OF RESEARCH: Book Ph.D Dissertation MA Thesis Article Other _____

PROSPECTIVE TITLE: _____

RESEARCH PROPOSAL: Please attach a statement addressing the following areas. Statement should not exceed five typewritten pages.

- A. Title of Project
- B. Brief description of project, including scope, objective of research, methodology, and possible conclusions or results.
- C. Relation of the holdings of the Dwight D. Eisenhower Library to your research.

NAME OF ARCHIVIST CONTACTED AT THE DWIGHT D. EISENHOWER LIBRARY: _____

PROPOSED BUDGET: \$ _____

GENERAL ITEMIZATION OF HOW FUNDS WILL BE USED: Airfare: _____

Number of Days @ \$75 per diem: _____

Other: _____

ESTIMATED DATES AT THE DWIGHT D. EISENHOWER LIBRARY: From: _____ To _____

OTHER GRANTS: (Please list any other grant(s) received or applied for) _____

PLANS FOR PUBLICATION OR OTHER USE OF THE PRODUCT OF YOUR RESEARCH: _____

REFERENCES: (These persons may be consulted for confidential information concerning your research and writing ability and the originality of your proposed research. I have requested that they provide letters of recommendation.)

	Name	Address	Telephone Number
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

PLEASE INCLUDE WITH THIS APPLICATION: 1) Letter from Eisenhower Library providing information on relevant collections; 2) Summary (do not exceed five pages) of the subject and scope of the research; 3) Curriculum vitae including academic background and publications; 4) a 10-15 page writing sample; 5) 2-3 supporting letters from academic advisors or professional colleagues, as indicated in the "references" section

Applicant's Signature: _____ **Date:** _____

RESEARCH GRANT INFORMATION

These grants of up to \$1,000 are awarded bi-annually, and are intended to offset the travel and lodging costs of researchers using the holdings of the Dwight D. Eisenhower Library. **The travel grants are valid for one year.**

Application deadlines are February 28 and September 30. Applicants will be notified of the Committee's decision approximately six weeks after the deadline date. Applications should be mailed to:

**Abilene Travel Grants Program
Eisenhower Foundation
c/o Eisenhower Presidential Library
200 S.E. 4th Street
Abilene, KS 67410
1-877-RINGIKE
Fax (785) 263-4218
e-mail: eisenhower.library@nara.gov**

*****LIBRARY USE ONLY BELOW THIS LINE*****

Date Received: _____ Comments: _____

