



CURA PROGRAM AT THE UNIVERSITY OF VICTORIA
APPLICATION FORM

Institution/Organization name:		Address:	
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Phone:		Fax:		E-mail:	
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Name of officer of institution/organization:	Signature of officer of institution/organization:
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Project director name:	Project director signature:
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PROPOSAL OUTLINE (PLEASE SUBMIT ON ATTACHED SHEETS):

1. Provide a one or two paragraph summary of the project.
1. Describe the project in more detail, indicating the collection or cultural property on which it is based.
2. What are the expected outcomes of this project?
3. How does this project fit the needs and goals of the institution or organization?
4. How does this project meet the CURA guidelines?
5. What expertise and assistance is expected from the CURA partners?
6. Who are the partner and local collaborators?
7. Describe the capability of the institution or organization to undertake this project.
8. What facilities are currently available to begin the project?
9. Give the dates when the project will begin and end.
10. What provision will be made to continue the project if not completed in this time frame?
11. What are the long-term benefits of this project?
12. What funds are requested from the CURA program?
13. Submit a budget for this project on the form provided.

MAIL YOUR ORIGINAL SIGNED APPLICATION AND 5 PHOTOCOPIES TO:

Barbara Winters, CURA Program Coordinator
Department of History in Art
Fine Arts Complex, Room 151
University of Victoria
Victoria, B.C. V8W 2Y2

13. **BUDGET:** Detail the organization's direct expenses and revenue for this CURA project. Please refer to the SSHRC CURA expenses guideline for eligible expenses. On a separate page a) justify the amounts requested and b) list other sources of revenue, indicating if confirmed or pending.

Expenses	Total Cost	Contributions		
		CURA (A)	APPLICANT (B)	OTHER (C)
Personnel:				
Administration				
Research				
Students				
Travel				
Equipment				
Supplies				
Other				
TOTAL	A+B+C	A	B	C