



THE PAUL K. RICHTER AND EVALYN ELIZABETH COOK RICHTER MEMORIAL FUND

Summer Richter Application Form

The maximum Summer Award is \$1500

Student Information:

Name: _____ Student ID: _____ Date: _____
Phone #: _____ e-mail address: _____ Campus Box # _____
Current Class Year (check one): FY SO JR SR Expected Graduation Date (Term [FA, WI, SP]/year): _____
Declared/Intended Major(s): _____
Declared/Intended Minor(s): _____

Project Information:

Project Start Date: _____ Project End Date: _____
Project Title: _____

Faculty Mentor/Supervisor: _____

Project Type (choose the best fit): Research/Scholarship Internship* Experiential (international travel)**

*For internship applicants: If approved for Richter funding and before funds are made available, you must provide a letter from the site supervisor confirming the dates of the internship. Also, the letter must state whether or not this is a paid internship. If it is paid, the letter needs to state the amount. This letter is **not** required at the time of application.

**If your project includes international travel, you must also apply for funding from the Stellyes Center for Global Studies.

Your application must include the following: (required documents)

- ☐ Summer Richter Application Form
- ☐ Project Proposal (no more than five pages in length), **must** include the following:
 - Abstract (250 word maximum)
 - The primary objectives and the significance of the project
 - The methods or strategies you will use to conduct your project
 - A timeline for conducting the project
 - A description of your academic preparation for this project
 - An explanation of the relationship of the project to your academic and career goals, please indicate if this project is in preparation for Honors or Senior Research
- ☐ Richter Summer Budget Form and documentation of expenses
- ☐ One copy of your transcripts (unofficial transcripts via your My Knox account)
- ☐ A letter of support from faculty sponsor (you may include the letter with your application or your faculty sponsor may submit it separately to the Vovis Center or as an email attachment to Sandy Jones, sljones@knox.edu)

Student Signature _____

Date _____

Office use only

Date Received: _____

Auto ID: _____

R Number: _____

SUBMIT COMPLETED APPLICATION FORM ALONG WITH ALL REQUIRED DOCUMENTS TO:
The Gerald and Carol Vovis Center • Alumni Hall Room 231 • Knox College Box K-136 • sljones@knox.edu