



2009-10 TERM-TIME RESEARCH TRAVEL GRANT APPLICATION

DRCLAS Term-time Research Travel Grants support academic research to be conducted as part of a regular Harvard thesis degree program, such as a senior honors thesis, dissertation, or a professional school thesis-equivalent. Term-time grants are partial grants intended to help support one to three weeks of research travel during the academic year (usually in January). Priority is given to **first semester seniors** working on a senior honors thesis and **mid- to late-stage dissertation writers** (or a professional school thesis-equivalent).

Application Checklist:

- APPLICATION FORM**
Complete the attached application form.
- BUDGET**
Complete the attached itemized budget form.
- CURRENT RESUME**
Indicate significant activities, achievements, and work experience demonstrating your interests and goals.
- RESEARCH PROPOSAL**
In a brief statement (max. 500 words), outline the research you plan to undertake, identifying whether it is preliminary or follow-up thesis or dissertation research, and the necessity of undertaking it in the proposed site(s) at this time.
- CURRENT OFFICIAL TRANSCRIPT**
Obtain from the Registrar. Allow five working days for processing.
- LETTER OF RECOMMENDATION**
Submit a letter of recommendation from your thesis or dissertation advisor, or other faculty member who is familiar with your work. The letter should address and support your need to do follow-up or preliminary thesis or dissertation research at this time and in site(s) indicated.

PLEASE SUBMIT MATERIALS TO:

Yadira Rivera, Student Services Associate (yrivera@fas.harvard.edu)
David Rockefeller Center for Latin American Studies
Center for Government and International Studies
1730 Cambridge Street, South Building
Cambridge, MA 02138 • University Mail
Phone: 617-496-9153 • Fax: 617-496-2802

Deadline: Monday, October 19, 2009 by 12 pm



David Rockefeller Center
for Latin American Studies

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Application Form

(PLEASE TYPE OR PRINT CLEARLY)

NAME:	
SCHOOL/DEPARTMENT:	YEAR OF GRADUATION:
DATE AND PLACE OF BIRTH:	U.S. CITIZEN:
SOCIAL SECURITY NUMBER*:	HARVARD ID:
CAMPUS/LOCAL ADDRESS:	
PERMANENT ADDRESS:	
LOCAL TELEPHONE:	E-MAIL:
THESIS/DISSERTATION ADVISOR:	
THESIS/DISSERTATION TITLE:	
DESTINATION:	
APPROXIMATE DURATION OF STAY:	
AFFILIATION(S) IN COUNTRY OF DESTINATION:	

* if resident or non-resident alien, provide nationality and green card or visa number



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Budget

NAME:

Fill in all the categories with exact figures or the most accurate estimates you have at the present time. If necessary, provide comments in area below. Please attach a travel itinerary, and copy of plane ticket or price quote from a travel agent.

EXPENSES:

Location and Duration of Trip:
Airfare (itemize fares to multiple destinations):

Internal Travel Expenses:

Lodging:

Food:
Other Expenses (please itemize):

TOTAL EXPENSES:

RESOURCES:

Personal Funds:
Other Grants or Awards:
Other Resources:
TOTAL RESOURCES:

TOTAL AMOUNT REQUESTED: