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**Small Grants Cover Sheet**

Please fill in the information below:

|  |  |
| --- | --- |
| **Principal Investigator (first name, last name):** |  |
| **Address:** |  |
| **Email:** |  |
| **Phone:** |  |
| **Fax:** |  |
| **Title of Project:** |  |
| **Lay Summary (250 words):** |  |
| **Total budget requested:**  |  |