

SSHRC Explore Grant Application Form

Please return application materials via email to:

officeofthechair@utoronto.ca

Office of the Chair

Department of Anthropology

19 Russell Street, Toronto, ON, M5S 2S2

Name of Applicant:	Total Amount Requested:
Short Title of Project:	
Start Date Requested:	Projected End Date:
Will further support be requested from this	Location of Research:
fund in order to complete the project?	
Other funds applied for or granted, for this or rel	ated projects?
What published form do you expect this work to	take?
I and for that	
I certify that: Vertebrate animals will/not be involved in the	proposed research. Liwill submit form ORA 2 if
vertebrate animals will be involved.	proposed research. I will submit form OTA 2 if
Human subjects will/not be involved in the pro	posed research. I will submit form ORA 7 if
human subjects will be involved.	
I certify that I will adhere to the conditions and g	guidelines of the research award:
Signature of Principal Investigator D	ate

<u>BUDGET:</u> Please explain budget items in detail, and enter justifications in the "Summary of Proposed Research" section. The total funds requested should not exceed the maximum allowed for the programme to which you are applying.

Qualifications		(Hr	s./Wk.)	Fringe Benefits	Estimated Expenses
					•
OTAL for Personnel:					
AND AND DISCOURT OF THE PROPERTY OF THE PROPER	· c.				
UPPLIES: Please list speci Quantity				Unit Cost	Estimated
Quantity	L	Description Unit Cost			Expenses
COTAL for Symplical					
COTAL for Supplies:					
TRAVEL:					
Locations	Duration	Mode	Fare	Subsistence	Estimated Expenses
			1	i	

OTHER EXPENSES: Please be specific		
Description	Unit Cost	Estimated Expenses

TOTAL for Travel:

TOTAL FUNDS REQUESTED:	

SUMMARY OF PROPOSED RESEARCH: In the space below, describe the research objectives and
procedures. Justify the choice of location(s) and budget items requested.

Additional Space for Research Grant applicants: