

APPLICATION for KCP VISITING PROFESSORS  
Grant Funding



Proposed Visiting Professor

Title (Dr., Mr., Mrs., Ms) \_\_\_\_\_

Full Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Pronouns used: \_\_\_\_\_

University /Organization Affiliation, if any: \_\_\_\_\_

Position and Department: \_\_\_\_\_

For reporting purposes:

Ethnicity: \_\_\_\_\_ Gender: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Permanent Resident or Visa: \_\_\_\_\_

NOTES, if any

Proposed Program Title and Description:

Proposed Time, Date, Place:

Description of how this will affect the target audience of academically and/or economically disadvantaged students. PROPOSED NUMBER OF STUDENTS SERVED \_\_\_\_\_

How will this be marketed to/promoted within the target audience of academically and/or economically disadvantaged students?

What unique perspectives does this Visiting Professor add that is not already adequately covered by other faculty members?

If this person has been a KCP Visiting Professor at any other Michigan university, please provide:

(Repeat as many times as necessary)

Name of the University:

Course/event instructed:

Dates of the course/event:

Proposed Budget:

	VP (state) funds	University Match (any funding provided by other University Departments or sponsors)
Salary/Honorarium		
Travel		
Hotel		
Other (Please list)		
TOTAL COSTS		

Total cost associated with this program: \_\_\_\_\_

Submitted by: \_\_\_\_\_

Amount approved by VP University Representative: \_\_\_\_\_