**CURRICULUM INTERNATIONALIZATION FACULTY GRANT
COVER SHEET**

Project Title: \_\_\_\_\_

Name of Project Director: \_\_\_\_\_

Number and title of ETSU course proposed for development: \_\_\_\_\_

Current ETSU position: \_\_\_\_\_

Campus mailing address: \_\_\_\_\_

Department: \_\_\_\_\_

Your Email address: \_\_\_\_\_

Your telephone number: \_\_\_\_\_

Number of students likely to benefit directly from the project, annually:

1. Undergraduate: \_\_\_\_\_
2. Graduate: \_\_\_\_\_

Signatures:

Project Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_