

**Academy for the Visual and Performing Arts
Curriculum Development Grant Cover Sheet**

Principal Investigator: _____

Department: _____

Mail Stop: _____

Phone: _____

Email: _____

Co-Investigator: _____

Department: _____

Mail Stop: _____

Phone: _____

Email: _____

Department Code _____

Course Number _____

Name of the Proposed Course: _____

Is this a _____ new course or a _____ revision of an existing course?

When do you expect to offer this course of the first time? _____

Amount Requested for Classroom Activities: _____

PI Signature

Date

Co-Investigator Signature

Date

PI Department Head Signature

Date

Submit complete application (project description, draft syllabus, and budget if applicable) as a pdf to avpa@tamu.edu