



Research Fellowship Cover Sheet

I am currently a: _ Master's Student _ Doctoral Student

Name and Title: _____

Organization: _____

Address: _____

City/State/Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

Name of Institution: _____

Name of Faculty Advisor: _____

Address of Institution: _____

City/State/Zip: _____

Title of Project: _____

Project Description – *Briefly describe the research and how it advances the models of care that have emerged from the Camphill Movement:*

References – *please list two institutional references other than faculty advisor:*

Name: _____	Name: _____
Title: _____	Title: _____
Phone: (____) _____	Phone: (____) _____
Email: _____	Email: _____

Signature of Advisor: _____

Date: _____

*If submitting by mail, please send to
M. Starita Boyce-Ansari, Ph.D., VP of Development and Philanthropy
Camphill Foundation, 285 Hungry Hollow Road, Chestnut Ridge, NY 10977*