



## **The Amara Balthrop-Lewis Endowed Fund for Special Concentrations**

### **INFORMATION**

The Amara Balthrop-Lewis Endowed Fund for Special Concentration (the ABLE fund) provides program-based financial support to students who wish to deepen their intellectual immersion in their field. As scholars outside of established departments, Special Concentrators must often scramble to put together financial resources for research funding, materials acquisition, and conference travel. While such activities are not critical to the success of any undergraduate scholar at Harvard, Special Concentrators are often operating at the very far reaches of interdisciplinarity, thus particularly benefit from the opportunity to support their intellectual interests outside of standard academic categories.

### **APPLICATION INSTRUCTIONS**

To apply for ABLE funding, Special Concentrators should complete this form which requests a description of the project, including how it is related to their concentration, as well as a budget and a statement from their Faculty Adviser endorsing the proposal.

1. Complete this form with the information requested below.
2. Submit this form to [specialconc@fas.harvard.edu](mailto:specialconc@fas.harvard.edu).
3. Applications will be reviewed within two weeks of the deadline

### **STUDENT INFORMATION**

Name: \_\_\_\_\_ Class: \_\_\_\_\_

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

Concentration: \_\_\_\_\_ House: \_\_\_\_\_

Please describe your project, including how it is related to your concentration.



## **BUDGET**

Please provide a budget for your project.

## **OTHER SOURCES OF FUNDING**

Please list other sources of funding that you are investigating. (Harvard College Research Program, non-Harvard grants, self-funding, etc.)

**FACULTY ADVISORS**

Please meet with your advisee to discuss their plans, and then provide a short statement here regarding your support of this proposal.

**REQUIRED SIGNATURES**

Faculty Advisor: \_\_\_\_\_ Date \_\_\_\_\_

Faculty Email: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

**SPECIAL CONCENTRATIONS REVIEW**

Approval:

Signature: \_\_\_\_\_ Date \_\_\_\_\_