



Sandy Cochran Memorial Fund Project Application

*Mail completed application to:
The Sandy Cochran Memorial Fund Committee
to The Forestry Sciences Laboratory
P.O. Box 267, Irvine, PA 16329*

Please complete the following and attach a brief (*less than one page*) description of the proposed project, including its potential benefits to the counties mentioned in the attached brochure. Attach a budget for the entire project, identifying other sources of support.

Project Director's Name: _____

Tax ID of recipient () Organization _____ () Individual _____

() Non-profit _____ () Other _____

Address, phone and e-mail: _____

Project Cooperators: _____

Title and location of proposed project: _____

Funds requested: _____ Duration of project (*years*) _____

Semi-annual progress statements regarding the status of your work on the project will be expected.

Please attach at least 2 letters of support, your project description, and your project budget.

Signature of Applicant _____ Date: _____

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Due June 1 annually