

**MARION AND JASPER WHITING FOUNDATION**

**CANDIDATE INFORMATION FORM**

<b>Name:</b>	
<b>Title:</b>	<input type="checkbox"/> Professor <input type="checkbox"/> Assistant Professor <input type="checkbox"/> Associate Professor <input type="checkbox"/> Graduate Student <input type="checkbox"/> Other: _____
<b>Department:</b>	
<b>School:</b>	
<b>Email address:</b>	
<b>Preferred Mailing Address:</b>	
<b>Title of Project:</b>	
<b>Summary Description: (a brief paragraph)</b>	
<b>Total Amount Requested:</b>	
<b>Past Whiting Winner:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Have you traveled to this location in the past?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Letters of Recommendation (name and title):</b>	1.) 2.) 3.)