



ALFRED P. SLOAN FOUNDATION  
Suite 2550  
630 Fifth Avenue  
New York, NY 10111-0242

## **SLOAN WORK-FAMILY CAREER DEVELOPMENT GRANT PROGRAM**

### **2009 APPLICATION FORM**

1. Name:

2. Preferred Mailing Address:

3. Additional Contact information:

Email:                      Office phone:                      Home phone:                      Cell phone:                      Fax:

4. What is the best way to reach you?

5. Present Position:

6. Title of your proposal:

7. In what discipline or field would you place this study?

8. Please tell us where you learned about this program:

9. Name, address, and phone number of the scholar who will be writing your letter of recommendation:

To help analyze our applicant pool, please complete the following:

10. Please list your highest degree completed: (Institution, Degree, Discipline, Year Received):

11. Please indicate your ethnic origin:

12. Date of Birth (Month/Day/Year)

13. Gender: Female    Male

### **APPLICATION CHECKLIST:**

- Application form
- Summary of proposed research project (1/2 page)
- Project description (6 single-spaced pages, 12-point font, 1 inch margins including bibliography)
- Career history (no more than 1 single-spaced page)
- Examples of past work-family research
- Curriculum vitae/resume
- Reference letter

### **DELIVERY DETAILS**

Three (3) copies of this application must be sent by mail to the address below. Applications must also be sent electronically (in MSWORD or ADOBE ACROBATE format). Our email address is: [work-family-grant@sas.upenn.edu](mailto:work-family-grant@sas.upenn.edu)

### **Mailing Address:**

Sloan Work-Family Career Development Grant  
Jerry A. Jacobs  
Department of Sociology  
University of Pennsylvania  
3718 Locust Walk  
Philadelphia, PA 19104-6299

**Application and all materials must be postmarked by February 2, 2000.** We will not consider late applications.