

Valparaiso Project Practice Grants Program
Linwood House
Valparaiso University
Valparaiso, IN 46383-6493

Date: _____

Project Director Qualifications Form

Please tell us about the qualifications of the person who will be chiefly responsible for leading this project.

Name of Project Director: _____

Education:

Relevant prior employment and volunteer experience:

Relation to the community you hope will benefit from the project:

Any publications or other projects that would demonstrate competence:

Other information you would like to share with us: