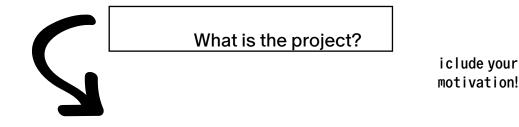
Application Form

name department generation [student number] phone number project name	rrit Rietveld Academie
project members (include depart- ments)	







Who is the project intended for and how does it affect them?

How does the project socially engange/benefit the Rietveld/Sandberg community?



Will the impact last beyond your project?

provide		
a timeline for the project		
you can use the boxes for different stages	7	
please pro- vide dates	L	
		Not enough space? You can attach
provide a brea	kdown of the budget	your own document
EEEEEE	what for?	

Email your filled out proposal to: Studentcouncil@rietveldacademie.nl