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**APPLICATION FOR THE SOCIETY FOR PENNSYLVANIA ARCHAEOLOGY  
COWIN AWARD**

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DATE OF APPLICATION: \_\_\_\_\_

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**APPLICANT INFORMATION**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

PO Box/Apt Number: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

SPA Chapter Name: \_\_\_\_\_

Are you an SPA State Member? Yes / No  
(You must be an SPA state member to qualify for the Cowin Award.)

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**GENERAL SITE INFORMATION**

Name of Site: \_\_\_\_\_

Site Registration Identification: \_\_\_\_\_

Site Location: \_\_\_\_\_

Site Director Name: \_\_\_\_\_

Site Director Contact Information:

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

## **APPLICANT'S SCOPE OF WORK AND CONTRIBUTIONS**

Describe in detail the work you have done at and/or for the Site and how your work has contributed to the understanding of the Site. You may either write about it in the space provided here or attach a separate document.

**SITE DIRECTOR RECOGNITION OF APPLICANT'S ACCOMPLISHMENTS**

Describe the applicant's work done at and/or for the Site and how that work has contributed to the understanding of the Site. You may either write about it in the space provided here or attach a separate document.

**SPA CHAPTER PRESIDENT ENDORSEMENT OF APPLICANT**

Please confirm the Applicant's contributions to the understanding of the Site. You may either write about it in the space provided here or attach a separate document.