

FACULTY & STAFF
**PROFESSIONAL DEVELOPMENT
 FUNDING REQUEST**



Full Name

Department (Circle One)	Criminal Justice	Education	English & Modern Languages
	Fine Arts	Mathematics	Social Sciences
Position Type	Faculty		Staff
Title / Rank			

Reason for PD Request:
(Include location and title of event)

Summary of Activity Expenses *(please indicate what you are seeking funding for)*

Expense Category	Amount of Expense Requesting	(Office of the Dean Use Only)
Registration Fee	\$	
Transportation (mileage/airfare/taxi/train/bus)	\$	
Lodging	\$	
Meals	\$	
Other:	\$	
Total Cost of Request	\$	

Please Respond to the Following Questions:

What do you specifically hope to hear and/or gain by attending this event?

How will you share the knowledge and information gained from this event with students and colleagues?

PLEASE NOTE: By the end of the semester following receipt of the funding, recipients of SESA Professional Development funding shall file a written report of the activities and accomplishments of the award with their Department Chairperson and Academic dean. Failure to do so will disqualify the faculty member from applying for future funding.

SIGNATURES

SIGNATURE OF APPLICANT

DATE:

APPROVED

DENIED

MORE INFORMATION NEEDED

SIGNATURE OF THE DEAN

DATE