# College of Arts and Sciences

**AY 18** FACULTY DEVELOPMENT FUNDS REQUEST FORM

Guidelines for Application:

**For Office Use Only:**

**Previous awards this FY: \_** **APPROVED: Yes No**

**AMOUNT: \_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Academic Dean

* **Proposals recommended by Department Chair must be received by the Dean by the following deadlines:**

**Monday, June 19th** for July, August, September, and October

 **Monday Sept. 25th** for November, December, January, and February

**Monday, January 8th** for March, April, May, and June

*Exceptions may be made for unanticipated conferences*

* Applications will not be funded retroactively.
* Funds will be budgeted across the academic year. Awards are dependent upon available funds. Applications are funded at a maximum of 60%. Awards will not exceed $2,000 per award.
* Awards are based on the project's contribution to the candidate's scholarship, teaching, students, department, and the university, as articulated on the application.
* Applicants are encouraged to seek cost effective travel arrangements in accordance with the PSU travel guidelines.
* Should funding be awarded, faculty are required to submit a written report within 30 days of the completion of the activity to the Department Chair with a cc to the Dean. **Reimbursement will not be issued until the written report is received.**
* *Use of professional development funds are subject to University audit.*

Date of Application:

Faculty Member:

Department: MSC:

Amount Requested (after dept. contribution): $

Conference Name:

Destination:

Date(s) of Activity/Timetable for Project:

 Purpose of Activity (select all that apply):

[ ]  Attend scholarly/ professional conference

[ ]  Present at scholarly/professional conference

[ ]  Faculty research and creative activity

[ ]  Other:

Date of last PD award: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Details of activity with significance, department need, and contribution to the candidate's scholarship, teaching, students, department, and the university (use separate paper as needed).

Proposed Budget: **Expenses:**

Conference Registration Fee $

Mileage/Tolls $

Airfare $

Bus/Shuttle/Rental Car $

Hotel $

Per Diem $

Parking $

Other (Please List) $

## Total Expenses: $

**Provided Support:**

Departmental Support $

Other Support (Please List) $

I have used all of my available departmental support for this fiscal year (initial here):

## Total Support: $

**Total Amount Requested:** $

**(Expenses minus Support)**

Signature of Applicant: Date:

Department Chair Comments regarding contributions to candidate’s scholarship, teaching, students, and department needs. Recommendation for Approval or Non-approval (include information about replacement of applicant if release time is involved):

Signature of Department Chair Date

Please return completed forms to:

Kristen Hersom

Senior Administrative Assistant

Office of Academic Affairs, MSC 03 kahersom@plymouth.edu