UNHM Staff Professional Development Grant Proposal Form

Deadlines for submission of proposals are: February 15, May 15, August 15, November 15

Please submit 1 copy (digital or printed) of this proposal and budget sheet and any applicable documentation to the chair of the Staff Professional Development Grant committee. Copies of relevant materials including conference brochures, specific cost information, catalogue advertisements must accompany the proposal. **Incomplete applications will not be considered**.

Applicant Name	OS PAT	
Department	Phone	
Position	years at UNHM	
Benefits eligible position yes no		
Have you received a Staff Professional Developr yes no If yes, when?	• • • • • • • • • • • • • • • • • • •	
Proposed Professional Development Activity		
Date(s) of program activity		

Please provide a detailed description of your proposal and explain how the program/activity will benefit you, your department and/or the College. Attach a separate sheet if necessary.

UNHM Staff Professional Development Grant Budget Outline

ITEMIZED EXPENDITURES

Registration/	Tuition, etc.			\$	
Meals*	#days	_ @ \$	/day	\$	
Lodging*	#days	_ @ \$	/day	\$	
Travel Exper	nses				
-			Air Fare	\$	
			Auto**	\$	
Other (Speci	fy)			\$	
Misc. (Specif	fy)			\$	
			EXPENSE TOTAL	. \$	(attach documentation)
(max. Perso Depar Other *Consult per c **Check curre	A Profession \$750) nal Contribut thental Cor (Specify) diem rates avent mileage ra	ntribution atribution ailable in tales	opment Grant Requ + the Business Office tary nature of the con		\$ \$ \$ \$
Applicant sig	nature		_		Date
As Superviso complete.	or, I endorse	this app	lication and certify t	hat the	information is accurate and
Supervisor's	signature		_		Date
date received// approved disapproved amount granted \$ Committee action date//					