

APPLICATION FOR SHORT-TERM Project are more like FACULTY PROFESSIONAL DEVELOPMENT FUNDING (ARTICLE 13)

Please attach conference/workshop information with your application. In order for your application to be considered by the committee, it must include:
1) Conference/workshop information, 2) Registration fees information, and 3) travel information In order to be considered for reimbursement, this application must be submitted to your Division Dean at least 30 days prior to the date of the Conference

APPLICANT INFORMATION

APPLICANT'S NAME:			
EMAIL:		PART-TIME OR FULL-TIME:	
DIVISION:			
TODAY'S DATE:			
CONFERENCE INFORMATION			
CONFERENCE/WORKSHOP TITLE:			
DATE(S) OF ACTIVITY:			
LOCATION OF ACTIVITY (CITY, STATE):			

FACULTY PROFESSIONAL DEVELOPMENT ACTIVITY QUESTIONS (PLEASE ANSWER ALL QUESTIONS)

Please note: When completing the Short-Term applications, please be sure to answer each section in complete sentences. We cannot evaluate your proposal containing only a phrase or single sentence. Please define all acronyms.

1) Write a detailed description of the activity. Include the title of the conference/workshop, location and sessions you propose to attend. **Please include electronic copy of Conference Materials.**



2) Describe how this activity is inspiring and relevant to your personal goals and professional development. (These funds are available for an individual's professional growth, so please provide this information with regard to individual advantage, not group or institutional advantage.)

3) How do you think this activity will enhance your work at Skyline College? (Share benefits to your students and program.)



FACULTY PROFESSIONAL DEVELOPMENT FUNDS (ARTICLE 13) REQUEST

CONFERENCE/WORKSHOP COST				
CONFERENCE/REGISTRATION FEES				
TRAVEL FEES - IN-STATE MAXIMUM \$1,500.00 / OUT-OF-STATE MAXIMUM \$2,500.00				
TRANSPORTATION (airfare, mileage, other)				
CAR RENTAL (shuttle, bus, taxi, train, ride-share)				
LODGING (room charges and taxes only)				
MEALS (# of days x per diem rate - reference AP8.55)				
MISCELLANEOUS (bridge tolls, parking charges, business phone calls, business-related Wi-Fi use, etc.)				
TOTAL TRAVEL FEES				
TOTAL COST				
TOTAL FUNDS REQUEST				

Please check the boxes below for the required materials needed to be considered for reimbursement:

Conference/workshop information (can be an agenda, flyer, e-mail or website printout) Registration fees information (any conference marketing material showing the registration cost) Travel cost information (include estimated airfare, mileage, lodging, etc.)

If these materials are not attached to the application, the application will be returned to your division office



APPROVAL SIGNATURE PAGE

DIVISION DEAN				
SUBSTITUTE CC	<u>IST</u>			
Cost of substitution/replacement. Base your estimated figure on high will be accomplished with a regular faculty at no cost, indicate cost a proposal to be considered.				
As of October 2023, substitute cost is not being considered for	SUBSTITUTE TOTAL SALARY			
review and approval by the committee. BENEFITS				
тс	OTAL SUBSTITUTE COST			
Date Submitted to Division Office				
Signature of Division Dean	Date			
Include reason if approved after the 30 day in advance	due date.			
Comments:				
PROFESSIONAL DEVELOPMENT COMMITTEE				
	Approved	Denied		
Signature of Committee Chair				
Comments:	Date	Date		
PRESIDENT				
	Approved	Denied		
Signature of President				
Comments:	Date			
Reminder: Conference Information Materials MUS	BE included for application to b	eain		

review. Information materials can include information from the conference's website, an e-mail from the conference, an agenda, etc. If nothing is attached, the application will be sent back to the divison office