

Request Support for Professional Development Activities

1. Name of Faculty Member	
2. Department	
3. Faculty Rank	
4. FTE (Percent effort of appointment)	
5. Event/Activity to be Attended (Title)	
6. Date(s) of Activity	
7. Location of Activity	
8. Amount Requested (Generally \$500 Max. – Please see instruction sheet)	
9. How OFA funds will be used (e.g., Registration, Travel, etc.)	
10. If additional funds are needed beyond the OFA support, please describe the expected source (e.g., departmental funds, personal funds, other sources).	

<p>(For next 3 questions, limit total to 400 words max.)</p> <p>11. Please describe why you are requesting support for this activity.</p>	
<p>12. How will the activity support your professional goals and how does the activity align with the mission of the College?</p>	
<p>13. Explain how you plan to share the knowledge and/or skills that you gain in this activity with the College community.</p>	
<p>14. Have you requested funds in the past?</p>	
<p>15. Have you received funds in the past? If yes, please list date(s).</p>	

Department Head Endorsement

I support this request and agree to provide the faculty member with the necessary release time to attend the proposed activity.

YES	
NO	

The Department agrees to provide additional support as described in item 9 above.

YES	
NO	
NOT APPLICABLE	

Department Head Signature

Date

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Please Print Department Head Name and Title

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Signature of Faculty Member Requesting Funds

Date

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For Office of Faculty Affairs Use Only

Date Received

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Approved/Denied

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Date of Action

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Follow-up Activity

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