

APPENDIX E

INDIVIDUAL PROGRAM OF PROFESSIONAL DEVELOPMENT

PROPOSAL

NAME: _____ TITLE: _____

DEPT: _____ OFFICE: _____ EXT: _____

PROPOSED PROGRAM STARTING AND COMPLETION DATES:

AMOUNT REQUESTED (Please complete budget sheet on reverse side) _____

BRIEF DESCRIPTION OF PROPOSED PROGRAM:

Signature

Date

Applies to proposals submitted under the APA Agreement
and is subject to the availability of funds.

The Unit Member agrees to return any unused funds and to
notify the Vice President in the event the program is not undertaken or completed.

J.P.M.

P.J.E.

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INDIVIDUAL PROGRAM OF PROFESSIONAL DEVELOPMENT

EXPENSES

TYPE	AMOUNT REQUESTED	AMOUNT APPROVED BY VICE PRESIDENT
Tuition/Fees		
Services		
Travel*		
Advertising and Printing		
Educational		
Equipment		
Other (Specify)		
Total		

*Applicable state regulations and procedures regarding the expenditures of any funds granted under this Professional Development Program must be followed. All expenses must be consistent with the provisions of Article XIII of the Agreement. (Travel to and from classes will not be funded by the Professional Development Program.)

BUDGET NARRATIVE: Please describe each proposed expenditure and indicate how it was calculated. The cost of any in-kind services provided by the College should be identified. Use additional sheets if necessary.

