

# APPLICATION FOR PROFESSIONAL DEVELOPMENT FUND

## I. PERSONAL INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email (please use university email): \_\_\_\_\_

Student Identification Number: \_\_\_\_\_

Current Mailing Address:

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

Have you set up/received payment from the University payroll in the last 180 days?: \_\_\_\_\_

College: \_\_\_\_\_

## II. EXPERIENCE & REIMBURSEMENT INFORMATION

Experience Category:

Conference

Attendant

Presenter

Externship

Other -please explain: \_\_\_\_\_

Name of Experience: \_\_\_\_\_

Location of Experience: \_\_\_\_\_

Date of Experience: \_\_\_\_\_

Total Hours of Experience: \_\_\_\_\_

Amount of Reimbursement Requested (\$750 maximum annually): \_\_\_\_\_

Did you receive funds for this experience from another source: \_\_\_\_\_

If yes, please list source of funds and amount:

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

Have you previously applied for Professional Development Funds?: \_\_\_\_\_

If yes, please list the semesters(s), year(s), and name of experience(s):

\_\_\_\_\_

### **III. PERSONAL STATEMENT**

**Please be sure to include a description of the activity and how it benefited your professional development. The minimum word count is 250 words and the maximum character count is 2500.**

#### IV. BUDGET

ITEM	DESCRIPTION	COST
	<b>TOTAL:</b>	

#### V. CERTIFICATION

I hereby certify that all information included in this application is true to the best of my knowledge and that all expenses detailed in this application directly relate to a professional development experience. I understand that I cannot qualify for funding if I completed the predicated experience for academic credit. Furthermore, I agree to disclose all other funding sources related to this trip. I understand that if I fail to disclose funding within 15 days of the notification of such an award or if I have falsified any information, I will be required to return any funding received and I will lose all rights to future funding from the Inter-Professional Council.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_