## **PROFESSIONAL DEVELOPMENT GRANT APPLICATION**



APPLICANT INFORMATION & BASIC ACTIVITY DESCRIPTION					
Employment Type:					
Name:					
Division/Department:	Job Title:				
Brief description of major job duties:					
Mail Stop:	Daytime Phone:				
Activity Title:					
Activity file.					
Activity Type:					
Location of Activity:	Activity Date(s):				
State your goals/objectives for this activity and how they relate to your job at Seattle Central. (max 300 words)					

ACTIVITY DETAILS				
If this activity is a requirement of your job, please explain:				
How do you plan to share what you've learned with interested colleagues? (max 300 words)				
Briefly describe the activities that will take place (in addition, you must attach a brochure that describes the activity via a PDF or attach a paper copy; links are not accepted)				
Indicate your level of participation in the activity:  Is there any additional information you would like the committee to know or consider?				

BUDGET & SIGNATURES  STRONGLY RECOMMENDED: Seek assistance fauthorization process. Please fill out the follow rates):	-	-						
•					\$			
Activity fee (tuition, registration, etc.)	Activity fee (tuition, registration, etc.)							
Lodging*	\$	Х		=	\$			
	per day		# of days					
Meals*	\$	Х		=	\$			
	per day		# of days					
Transportation		X	\$ 0.575	=	\$			
	# of miles		per mile					
Other expenses (itemize completely)		Exp	ense		\$			
		Exp	ense		\$			
		Exp	ense		\$			
Budget notes								
Total cost to complete activity	Total cost to complete activity				\$			
Total amount requested for this aware	d				\$			
If the total cost exceeds the maximum	awarded a	mou	nt, how v	vill yo	u fund the remaining amount?			
IMPORTANT: Sign and route for signature Applicant: I have read and understand the information I've provided is correct to the summary for the activity within 30 days of	Profession best of my	al D kno	evelopm wledge.	ent G If fun	rant guidelines. The ded, I agree to submit a brief			
Signature of Applicant	 Date							
<u>Department/Division Approval</u> : I have read for this professional development activity.	Additional			ttach				
Signature of Administrator	Printed Name			_	Date			
RETURN TO: EmployeeDev.Central@seatt	lecolleges.	<u>edu</u>	or <b>Dawr</b>	elle \	Wilkie @ <u>BE2101-H</u>			
Application Checklist & Reminders  Complete all 3 pages of application  Send in time to meet deadlines	Complete all 3 pages of application Include copy of TAR, activity brochure/agenda							