Request for Faculty Professional Development Funding

IST_FN-02 Administrative Guideline

The College of IST recognizes the importance of providing professional development for faculty. As such, we have allocated funds to individual faculty members as an annual allotment. Professional development activities may also be supported through various other sources such as your RIF return, salary buyout, etc., and as appropriate, activities funded via sponsored research.

When other funding sources have been exhausted, faculty can request support for professional development activities related to their research, resident instruction, or online instruction activities as well as other activities related to strategic initiatives.

**Stipulations:**
- Requests will be reviewed on a first come, first served basis
- Requests must be submitted at least one month prior to the activity

**How to Apply:**
- Complete the application below and submit via e-mail to Karen Brewster (kbrewster@ist.psu.edu) for verification of faculty funding availability and routing to the appropriate area for consideration.

**Check one indicating the primary focus of the request:**
- ☐ Research
- ☐ Resident Instruction
- ☐ Online Instruction
- ☐ Strategic Initiatives/Other Requests

**Requestor Name:** ________________________________  **Today’s Date:** __________________________

**Describe the proposed activity** (please address how this professional development activity relates to your success as a faculty member and how it will benefit the College. Limited to 200 words, attach additional pages as needed):
List any current funds available to support this activity if any (i.e., RIF, Allotment, Misc. Research, Sponsored Research, etc.):

If travel is involved, specify the date of travel, destination including the conference, workshop, agency, or organization being visited. Specify your role: presenter/speaker, committee member, attendee, agency/organization visit, etc. If the travel is to present a paper, please identify all faculty co-authors.

**Travel Dates:** From __________ To __________

**Destination** (city, State, country):

**Conference Name** (or workshop, agency or organization to visit):

**Role** (check all applicable):

- ☐ Presenter/Speaker
- ☐ Committee member
- ☐ Attendee
- ☐ Other (describe): __________________________________________

**Co-Authors:**

**EXPENSES**

**Itemized anticipated expenses** (attach additional pages if needed):

- Lodging: ____________________________
- Registration: ______________________
- Meals: ____________________________
- Transportation (type and cost): ____________
- Other Expenses (specify): ____________________________

**TOTAL EXPENSES:** ____________________________

**COLLEGE APPROVAL**

Approved Expenses: ____________________________

Approved By: ____________________________ Date: ____________________________

Last Updated: January 22, 2018