



Lyndon State College

Professional Development Fund Request

1. **Applicant/office:** _____

2. Status: NBU Administrator
 NBU Administrative Staff
 VSC-UP PAT
 VSC-UP SUP
 VSC-Staff Federation
 Other _____

3. Proposed activity/sponsor: _____

4. Location/date(s): _____

5. Describe how the proposed activity will benefit your professional development and Lyndon State College: _____

6. Budget:	<u>Item</u>	<u>Cost</u>
	_____	\$ _____
	_____	_____
	_____	_____
	_____	_____
	_____	_____

TOTAL: \$ _____

Request from Professional Development Fund: \$ _____

Other sources of funding that will be used: \$ _____ Department
\$ _____ Personal
\$ _____ Other _____

(over)

7. Briefly describe previous PDF grants or other development opportunities that you have received within the past year: _____

Signature: _____ Date: _____

Supervisor

I have reviewed this request with the applicant and support the grant request.

Comments: _____

Supervisor's signature: _____ Date: _____

Dean's signature: _____ Date: _____

Dean of Administration

___Approved ___Approved as modified ___Denied ___Deferred

Comments: _____

Signature: _____ Date: _____