COVER SHEET FOR 2017-2018 FACULTY DEVELOPMENT AWARD APPLICATION

Name of Applicant: ____________________________________________________________
Printed Name  Academic Title

Title of Proposal: _______________________________________________________________

Applicant’s Signature: __________________________________________________________

Quarter Desired: ______________ Released Course: _____________________________

Home Department: ____________________________________________________________

Phone: _________________________  Email: ________________________________

Previous Faculty Development Award Received? Yes__ No__ If yes, Award Date:_____

Appointment Date: ____________________________________________________________

This project will be administered by the Department of ____________________________

Administrative Contact: _______________________________________________________
Printed Name  Email  Phone

Department Chair Signature: __________________________________________________
Department Chair applications must be signed by Dean

<table>
<thead>
<tr>
<th>DaFIS</th>
<th>FAU (Full Account Unit)</th>
<th>Fund Source</th>
<th>(Fund Legacy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course</td>
<td>________</td>
<td>______________</td>
<td>GENVFND</td>
</tr>
<tr>
<td>Research Support</td>
<td>________</td>
<td>______________</td>
<td>OPPAA</td>
</tr>
</tbody>
</table>

Proposal Check List:

___ Cover Sheet
___ Service Activity
___ Course to be released from
___ Research Proposal (3 pages maximum, single-spaced)
___ List of Publications since 2012