COVER SHEET FOR 2018-2019 AF PROFESSIONAL DEVELOPMENT AWARD APPLICATION

Name of Applicant: ________________________________________________________________

Printed Name     Academic Title(s) __________________________________________________

Number of years of continuous service in academic title(s) _____________________________

Title of Proposal: _________________________________________________________________

Applicant’s Signature: _____________________________________________________________

Quarter or Timeframe Desired: ______________________________________________________

Home Department: _________________________________________________________________

Phone: ___________________________ Email ___________________________ Phone

Previous Professional Development Award Received?  Yes_____ No_____ Date ______________

This project will be administered by the Department of ________________________________

Department Administrative Contact: _________________________________________________

Printed Name   Email          Phone

Department Chair Signature: _______________________________________________________

Department Chair applications must be signed by Dean

Dean's Signature: _________________________________________________________________

Proposal Check List

_____ Cover Sheet (signed)

_____ Service Activity in the last four years (if applicable)

_____ Proposal (5 pages maximum, single-spaced)

_____ List of Publications in the last four years (if applicable)

---------------------------------------------------------------(office use only)-------------------------------------------------------------------------

DaFIS   FAU (Full Account Unit)   Fund Source   (Fund Legacy)

Course   _______  ________________      GENFND   (19900)

Research Support  _______  ________________      GENFND   (19900)