



GRAYSON COLLEGE

Staff Development Fund Application

Name: _____

Date: _____

Department: _____

Office phone: _____

Email: _____

Are there any available travel funds in your departmental travel budget? Yes No

What is the amount of your travel budget for the current budget year? \$ _____

Have you previously received an award from the Staff Development Fund? Yes No

If so, when: _____

Professional Development Activity/Conference: (Please attach copy of Brochure, Registration Form, or Proposal etc). If requesting funds for a campus wide development activity, please list who is sponsoring the event.

Date/s of attendance: _____

Location: _____

Estimated Cost: Travel: _____

Meals: _____

Registration: _____

Hotel: _____

Other: _____

TOTAL: _____

Explain how participation/attendance will benefit:

You: _____

GC's Mission: _____

Other Comments: _____

Applicant *Date*

Department Director/Dean *Date*

Executive Administrator *Date*

Chair, Staff Development Resource Team *Date*

Copies to: *Applicant* *VPBS*

To be completed by VPBS

1-1150-54100 → _____ → 1-_____ -54100

APPROVED DENIED

\$ _____ GRANT AWARDED FROM STAFF DEVELOPMENT FUND