

## Professional Development Grant Fund

(\$350 per year or accumulate over three years)

Complete the following paperwork and forward to the Academic Director's office. After approval from the Academic Director, paperwork is then forwarded to the Dean of Faculty for processing.

- Professional Development Fund Grants Application (front & back)
- Grant Request Planning Form
- COTC and Cost Share Travel Authorization Reimbursement Request Form (for Pre-Travel - **Section A only**). Include any registration, hotel, travel information with this form. Travel advances are included on this form.  
***OR - For Local Travel, complete the COTC and Cost Share Local Expense Reimbursement Request Form and Newark Campus Mileage Reimbursement Request Form.***

After review and approval from the Dean of Faculty, the necessary paperwork is then forwarded to the Travel Department for all airline reservations, registrations, travel advances, etc. to be made.

**(NOTE:** The traveler is asked to make their own hotel reservations on their personal credit card and get reimbursed after they return).

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After the faculty member uses their grant money - they are required to fill out the remaining paperwork and submit these items to the Academic Director who after approval, forwards to the Dean of Faculty.

- COTC and Cost Share Travel Authorization/Reimbursement Request Form (**Section B**) with actual travel expenses and receipts.
- Professional Development Grant Report Form

Copies of the final paperwork will then be forwarded to the Faculty Development Committee.

Some faculty members choose to use their Faculty Development Grant Funds for Professional Membership Fees. If this is the case, the following paperwork needs to be completed and forwarded to their Academic Director who will then forward to the Dean of Faculty:

- Professional Development Request for Professional Membership Fee Reimbursement
- Newark Campus Requisition for Materials and Services form

**CENTRAL OHIO TECHNICAL COLLEGE**  
**FACULTY DEVELOPMENT COMMITTEE**  
**PROFESSIONAL DEVELOPMENT FUND GRANTS APPLICATION**

This application along with The Grant Request Planning Form should be completed and submitted to the Academic Director for approval and will then be forwarded to the Dean of Faculty for processing.

Name: \_\_\_\_\_ Office: \_\_\_\_\_ Ext. \_\_\_\_\_

1. Rationale for Professional Development Fund Grant request:

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2. Objectives of program/project:

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(over)

3. How and when will the program/project be implemented?

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4. Academic Quarter in which Faculty Information Exchange Seminar or report will be submitted to the Faculty Development Chairman:

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5. Other information (if appropriate):

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6. **Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

7. **Academic Director:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ Other: \_\_\_\_\_

Comments: \_\_\_\_\_

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## COTC Professional Development Fund Grant Request Planning Form

Faculty Member: \_\_\_\_\_

Date: \_\_\_\_\_

	Miles	Estimated Expense	Reservation made (Y or N)	Money from Prof. Dev. Grant Fund	Other (i.e. personal \$)
<b>Travel</b>					
Car –mileage					
Airline ticket					
<b>Hotel</b> (attach info.)					
<b>Meals</b>					
Breakfast					
Lunch					
Dinner					
<b>Registration</b> (attach info.)					
<b>Other</b>					
<b>TOTAL</b>					

**There is a \$350 a year maximum per full-time faculty member or you can accumulate up to three years for a total of \$1,050.00**

**On the COTC Faculty and Staff tab, the following policies may be found on the web site:**

- [COTC and Cost Share Non- Local and Overnight Travel Authorization/ Reimbursement Request](#)
- [COTC and Cost Share Local Travel Expense Reimbursement Request](#)
- [Newark Campus Mileage Reimbursement Request Form](#)

**Professional Development Request For**  
**Professional Membership Fee Reimbursement**

This form is to be completed along with "The Newark Campus Requisition for Materials and Services" form and sent to the Academic Director which will then be forwarded to the Faculty Development Committee. Please attach the necessary form for registration/membership.

Name: \_\_\_\_\_

Office: \_\_\_\_\_ Ext. \_\_\_\_\_

Organization(s) Name & Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fee: \$ \_\_\_\_\_

Reason for membership (how will this help your professional development)

\_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Director: \_\_\_\_\_

Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_

Recommended Amount \$ \_\_\_\_\_

Faculty Development Committee: \_\_\_\_\_

Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_

Recommended Amount \$ \_\_\_\_\_

**On the COTC Faculty and Staff tab, the following policies may be found on the web site:**

- [Newark Campus Requisition Form](#)

## Professional Development Grant Report Form

This form is to be completed upon return from a conference/workshop.  
Please indicate how and when the information received at the conference (or  
from a continuing education course) was shared with colleagues.

Name: \_\_\_\_\_ Office: \_\_\_\_\_ Ext. \_\_\_\_\_

Date(s) information was presented to colleagues: \_\_\_\_\_

Please explain briefly the method and content of presentation: \_\_\_\_\_

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Return this form to the Office of the Dean of Faculty