## **FACULTY DEVELOPMENT GRANT PROPOSAL FORM**

Name:			
Date:			
Rank:			
Department:			
Type of grant:	(circle one)		
Mini Grant	Professional Enrichment	Community Enrichment	
Activity:			
Date/location	of activity:		
Goals/objectiv	es of the activity:		
Nature of activ	e participation: (if applying	ງ for 6% of funds)	
Accountability	<b>:</b>		
Itemized budg	et: (attach if necessary)		
I have first sought funds from the Chair/Dean of my academic unit and have been awarded \$			
<ul> <li>I have the</li> </ul>	nen sought funds from the '	VPAA, and have been awarded \$	
• I am req	uesting the balance from th	he FDWC: \$	
	nt I must document my invo at I will not receive FDWC fu	olvement in the activity described unds until I do so.	
Signature:			