

CONFERENCE DOLLARS APPLICATION

Please forward this application, with a copy of the workshop/conference registration form, to the Staff Development Coordinator, Staff Development Center, Library Building Room L-111.

Name _____ Social Security # _____ - _____

LCC Position _____ Division/Unit _____

Workshop/Conference Name _____

Workshop/Conference Date(s) _____

Cost for Registration/Books/Materials _____

Amount Requested _____ (Maximum cumulative award of \$100.)

If Approved Please:

- Reimburse me for the registration fee/cost of required books and materials.
- Make a check payable to the sponsoring organization and send it to me.
- Pay the registration fee directly to the sponsoring organization.

Please explain why you plan to attend this workshop/conference and how it is pertinent to your professional development.

Applicant's Signature _____ Date _____

FOR OFFICE USE ONLY:

- Approved for _____ (amount) Fall Semester Spring Semester Summer Session
- Disapproved

Staff Development Coord.

Advisory Board Member

Advisory Board Member

Date