

Leeward Community College
Application for Staff Development Funds
(Please print or type)
(You may also attach an additional page of explanation if required)

Description/Purpose of Activity:

Date/Time of Activity:

Location of Activity:

Target Audience:

Expected Number of Participants:

Amount Requested: \$ _____ (\$150 maximum)

Other Sources of Funding (if any):

Itemize Anticipated Expenses:

Item

Amount Budgeted

For Office Use Only <u>Amount Approved</u>

Contact Person _____ Position _____

Division/Unit _____ Extension _____

Signature

Date

Return completed form to Cindy Martin, Staff Development Coordinator, Innovation Center for Teaching & Learning. Applications will be reviewed at the monthly Innovation Center for Teaching & Learning Advisory Committee meeting normally held on the last Monday of each month during the academic year.