**ACADEMIC STAFF PROFESSIONAL DEVELOPMENT COMMITTEE - FUNDS**

**ASPDC Checklist**

|  |  |  |
| --- | --- | --- |
| Name of Applicant |  | |
| Position/Title |  | |
| Phone number and Email address |  | |
| Applicants Department/Unit |  | |
| Title of Proposed Activity or Project |  | |
| Date(s) of Proposed Activity or Project |  | |
| Total Amount required for the Activity or Project | |  |
| Total matching amount from other sources | |  |
| Total amount requested from ASPDC | |  |

***CHECKLIST FOR PROPOSAL SUBMISSION***

*Complete proposals help expedite review and processing.* ***Incomplete proposals will be returned for additional information.*** *The delay could result in the loss of funding for a proposal that might have otherwise been successful. To ensure that the review of your proposal is not delayed, please complete the checklist below before submitting your proposal.*

* You confirm you are classified as Academic Staff.
* This **ASPDC Checklist** including the signatures of the applicant, department chair or supervisor, and Dean or administrative officer is attached.
* This **ASPDC Application** is attached.
* **Department Chair/Supervisor Approval Form** is attached.
* Matching funds from the department/unit, outside sources, and/or personal contributions of at least 25% will be contributed.
* The[**ASPDF Budget Form**](http://www.uwp.edu/departments/governance/academic.staff/committees/forms/aspdcBudgetForm.docx) is attached.
* Supporting document(s) such as a program/conference description, program agenda, and/or related expense documentation (registration, lodging, airfare, meals, etc.) is attached.
* Appendices including such items as brochures, pamphlets, additional letters of support, etc. are attached.
* The complete proposal and supporting documents must be electronically sent to the [Chair of the ASPDC Committee](http://www.uwp.edu/contact/?uid=rasmussa) in **one pdf file.**

**Proposals must be submitted via email to Shauna Edson,** [**shauna.edson@uwp.edu**](mailto:shauna.edson@uwp.edu)**.**

Applicant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_

Department Chair / Supervisor Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_

Department Chair / Supervisor- PRINTED NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACADEMIC STAFF PROFESSIONAL DEVELOPMENT COMMITTEE - FUNDS**

**ASPDC Application**

***Please save the document to your hard drive, fill in all requested information, attach documentation proof, print and submit to the Chair of ASPDC. Shauna Edson,*** [***shauna.edson@uwp.edu***](mailto:shauna.edson@uwp.edu)

**Name of Applicant:**

**Date application was sent to ASPDC:**

**Are you presenting at the conference: Yes**  **No**

**1) Description of project or activity.**

**2) The potential for the project or activity to advance the mission/objectives and implement the strategies of the department/unit as a whole.**

**3) Professional benefits of the project or activity to the Applicant.**

**4) Have you received any funding from ASPDC in the past three years?**

**No**

**Yes**

**If yes, list all funding awarded in the last three years?**

|  |  |  |
| --- | --- | --- |
| **Year** | **Activity** | **Amount Awarded** |
|  |  |  |
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