

2016/2017 Faculty Development Fund Request
All requests must be submitted as hard copies to Sharon Procter, Associate Provost, Office of Academic Affairs. Time sensitive requests may be submitted digitally to sprocter@collegeforcreativestudies.edu.

Fa	aculty Name			
	Department			
Rea	ason for Trip			
Is this request for a field trip? If so, a Student Development Fund submission is requ			○ Yes	○ No
		nce will benefit the College must be a ne requested, include detailed plans		
	Anticipa	ated Expenses		
0(Description		Cost
Food				
Other				
		Total Anticipate	d Cost: —	
If the costs exceed the al	llotted budget, whic	ch budget center should be charge	ed?	
Applicant's Signature			Date	
Chair's Signature			Date	
O Approved	O Denied	Approved Amount		
Academic Affair's Signature			Date	

*If approved, you are responsible for completing the necessary travel arrangements and all payment requisitions. Travelers must adhere to the CCS Travel and Entertainment Policy (Blackboard>Campus Offices>Human Resources>Policies & Procedures). All reimbursement forms must be filed within 60 days of the event. If the trip is canceled, please notify the Academic Affairs Office immediately.