**Professional Development Funds Request Form**

|  |  |
| --- | --- |
| Name of Faculty Member |  |
| Faculty Member ID Number |  |
| Account # | 220-034-670-000 |
| Payee | Amount |
| 1. | 1. |
| 2. | 2. |
| 3. | 3. |
| Explanation | □ Check if paid by Pcard  |

INSTRUCTIONS TO FACULTY MEMBER: Present this form with receipts to your chair, who is to check the expenditure in relation to your Professional Development Plan and sign the form before sending it to Jill Trostle, Assistant to the Dean of the Faculty.

**Office Use Only:**

**Approval:**

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|  |  |
| **Department Chair** |  **Date** |

**Dean of Faculty Date**