

FACULTY DEVELOPMENT GRANT COVER SHEET

Faculty Member Requesting Grant: _____

Department: _____ College: _____

Please note that only one funded Faculty Development project is permitted per semester.

Project Title: _____

Project Date: _____

Project Description (include conference name and location):

Project Type (Check all appropriate boxes. See FDG section of Faculty Handbook for clarification of “production participation”. **Choose one category per proposal (Conference or Other).** **Maximum funding** for each category is listed next to the category)

Presentation/Productive Participant

National/International (\$1,400) Southeast (\$1,000) State (\$600) Local (\$200)

Research (\$700)

Academic Supplies (\$200)

Training / Workshop (\$300)

Generalized Budget Each line **must** contain a dollar value, even if it is zero.

Line 1: Funding Requested: _____

Line 2: Outside Funding: _____

Line 3: Departmental Contribution: _____ (Chair's initials if not zero) _____

Line 4: College Contribution: _____ (Chair's initials if not zero) _____

Line 5: Total Cost of Project: _____ (Verify this is the total of lines 1-4) _____

Approvals: Department Chair/Date _____ / _____

Academic Dean/Date _____ / _____

VPAA: Previous Grants: Yes No Date of Last Grant: _____

Summary on Files? Yes No Date of Last Grant: _____

Budget Detail*

| | Amount Requested | Amount Approved |
|---|---------------------|--------------------|
| Registration Fees | _____ | _____ |
| Air fare | _____ | _____ |
| (Destination): _____ | | |
| Ground Transportation (to/from): _____ | | |
| Own Vehicle (Mileage _____ @ 0.67 per mile) | _____ | _____ |
| Rental Car and Related Expenses. | _____ | _____ |
| Hotel (_____ days @ \$ _____ per day) | _____ | _____ |
| Meals (_____ days @ \$ _____ per day) | _____ | _____ |
| For in-state and out of state daily maximum meal allowance, please visit: | | |
| https://sao.georgia.gov/sites/sao.georgia.gov/files/related_files/site_page/SOG%20Meal%20Allowances%202014.pdf | | |
| https://www.gsa.gov/travel/plan-book/per-diem-rates | | |
| Project Supplies/Equipment (provide details) | _____ | _____ |
| Other (provide details) | _____ | _____ |
| Total Cost of Project | _____ | _____ |

*If necessary, attach a separate page with a furthermore detailed budget including all relevant costs.

As per the Faculty Handbook, you are required to attach a summary of the project, including what your participation will be and verification of your participation (ex. A letter of acceptance), if applicable.

Signature of Applicant / Date: _____ / _____

FDC: Full Funding Partial Funding Denied

Total Funds Approved: _____

Comments: _____

