

**CALUMET COLLEGE OF ST. JOSEPH**  
**Professional Development Request**

I request funds for the following professional development activity:

Activity \_\_\_\_\_

Location \_\_\_\_\_

Date(s) \_\_\_\_\_

Registration Fee \_\_\_\_\_

Travel Private Auto (est. mileage) \_\_\_\_\_

Air Fare \_\_\_\_\_ Lodging \_\_\_\_\_

Car Rental \_\_\_\_\_ Meals \_\_\_\_\_

Total Amount Requested \_\_\_\_\_

Relevance to current position \_\_\_\_\_ -

\_\_\_\_\_

\_\_\_\_\_

Other funded professional development activities this academic year

---

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Department

\_\_\_\_\_  
Office Ext.

\_\_\_\_\_  
Supervisor's signature

\_\_\_\_\_  
Date Reviewed

Request Approved \_\_\_\_\_

Request Denied \_\_\_\_\_

\_\_\_\_\_  
President's Signature

\_\_\_\_\_  
Date Reviewed

**NOTE:** This form is to be completed by the applicant and his/her Program Director or Department Chair, as applicable. If approved by the Program Director or Department Chair, as applicable and the President, a College purchase order should be attached. Final approval is granted when the purchase order is signed.