



# Additional Funds Request

This form is to be used by individuals to apply for or are seeking reimbursement for training

Return completed form to Professional Development email: [pd@swtjc.edu](mailto:pd@swtjc.edu)

## Section 1:

Your Name:

Plan Year:

Department:

Amount Requested: \$

Have Faculty Travel & Development Funds Been Spent?      Yes      No

Explain: Explain how funds were spent:

College Priorities:  
(Check all that apply)  
Other?

Critical thinking

Academic Writing

Student Engagement

✓	Documents Needed	Type of Funds	Funds Manager	Email	Phone
	<p><b>For PD Director:</b> Appropriate PD activity documented in Faculty Success</p> <p><b>For Grant Coordinator:</b> One paragraph on how this activity will help implement new classroom strategies.</p> <p>Email supporting documentation with this form</p>	Carl Perkins (Technical programs only)	April Ruhmann	<a href="mailto:asruhmann@swtjc.edu">asruhmann@swtjc.edu</a>	(830) 591-2920
	<p><b>For PD Director:</b> Appropriate PD activity documented in Faculty Success</p> <p><b>For Faculty Association President:</b> One paragraph on how this activity will help implement new classroom strategies.</p> <p>Email supporting documentation/receipts for expenses claimed with this form to PD Director .</p>	Special Purpose Grant (Faculty Handbook)	Faculty Development Grants Committee	<a href="mailto:beherndon@swtjc.edu">beherndon@swtjc.edu</a> <a href="mailto:pd@swtjc.edu">pd@swtjc.edu</a>	(830)591-7237

## Section 2: Fund Manager

Amount: \$ \_\_\_\_\_

Approved:      Yes      No      Signature: \_\_\_\_\_      Date: \_\_\_\_\_

Explanation:

## Section 3: Professional Development Director

- Faculty Member has completed 3 presentations within the prior 3 year in their area of discipline or an area that will improve teaching effectiveness- includes providing trainings and presentations to faculty on the material learned in the workshop, conference or course.
- Current full-time faculty member
- 2 years as full-time faculty member
- Has used the annual Faculty Development provision within the year according to Division Chair
- Has submitted receipts for all expenses claimed. (attached)

Approved:      Yes      No      Signature: \_\_\_\_\_      Date: \_\_\_\_\_

Explanation:

## Section 4: Vice President Academic Affairs

Approved:            Yes            No            Signature: \_\_\_\_\_ Date:

Section 1 to be completed by requester (then send to Manager)  
Section 2 to be completed by Fund Manager (then send to PD Director)  
Section 3 to be completed by Professional Development Director (then send to Dean)  
Section 4 to be completed by Dean