

STAFF DEVELOPMENT

Name: _____

Date: _____

Activity (Conference, Seminar, etc.)			
Name	Date	Location	Fee
Explanation:			

The Staff Development Award will be approved pursuant to Article 9 of the CSEA bargaining agreement.

1. Explain why you would like to attend this conference/ seminar. Consider the following in your response:
 - a. Special skills relevant to your position
 - b. Benefits to the College
 - c. Will you be presenting what you learned? If so, to whom?
2. A Conference Request form, found in the *Faculty and Staff Documents* section of the Gavilan College intranet must be filled out and accompany this document.
3. Submit request to the Staff Development committee chair for consideration by the committee for Staff Development funds.
4. Whenever possible, the Permission to Enroll should be submitted to the committee one (1) month prior to the starting date. Please email your complete forms to team-professional-growth@gavilan.edu.

(For Further Information, see the Classified Employment Contract, Article 9)

FOR COMMITTEE USE ONLY

Date Received by Chair: _____

Date Presented to Committee: _____

Date Approved: _____

Amount: _____

Date Disapproved: _____

Reason: _____

Initials of Committee Members:

Approve: _____ Disapprove: _____

- | | |
|----|----|
| 1. | 1. |
| 2. | 2. |
| 3. | 3. |
| 4. | 4. |
| 5. | 5. |

President/ Superintendent Signature

Date