



CAL MARITIME

Application for Department Faculty Development Funds

Name _____ Date submitted _____

Department _____

Classification _____ (tenured, tenure-track, lecturer (FT or PT), librarian, coach)

When was the last time you received department support for a faculty development activity and what was the activity?

Proposed faculty development activity _____

Date(s) of activity _____

Total amount requested _____

(If you overspend the amount requested, you may have to make up the difference.)

Faculty signature

Amount approved _____

Not approved _____

Department Chair, Dean of Lib, or Athletic Director signature

Date

cc. Director of Faculty Affairs
Academic Coordinator, Pat Harper