



**Classified
Staff Council**

BOWLING GREEN STATE UNIVERSITY

**Bowling Green State University
Classified Staff Council
Professional Development Fund Application**

Please submit this original, signed application and all documentation for projected expenses, including a copy of the agenda/registration form to csc@bgsu.edu.

Applicant Name: _____

Position: _____

Campus Address: _____

Area/Department: _____

BGSU Email: _____

BGSU Phone: _____

In the space below, please provide a brief summary of your proposal for funding. Explain how the program you want funding for will benefit you, your department, your college, and/or BGSU. Incomplete applications will not be considered.

Date & Time of training/event: _____

Location: _____

List all anticipated expenses that pertain to your need for the professional development funds.

Funding Requested: Registration Fees _____

Transportation _____

Lodging _____

Meals _____

Other _____

Specify: _____

Total _____

Fund Sources Requested: CSC PDF _____

Unit/Dept. _____

Other _____

Specify: _____

Total _____

Applicant Signature

Date

As the applicant's supervisor, I endorse this application and verify that the information provided is accurate and complete.

Immediate Supervisor's Signature

Date

Print Supervisor's Name

BGSU Phone

***For full application and reimbursement guidelines, visit: <https://www.bgsu.edu/classified-staff-council/professional-development-fund.html>. Reimbursements will not be processed until after the event/training and all proper paperwork and receipts are submitted.*