



HARTNELL COLLEGE

CONFERENCE/TRAVEL GRANTS – APPLICATION FORM (2019-20)

DEADLINES: JULY 15 / SEPTEMBER 15 / JANUARY 15 / APRIL 15
SUBMIT TO PROFESSIONAL DEVELOPMENT COMMITTEE (VIA OFFICE OF HUMAN RESOURCES)

APPLICANT'S NAME: _____

HOME PHONE: _____ COLLEGE PHONE: _____

EMAIL ADDRESS: _____

HCCD POSITION: _____ DEPARTMENT: _____

CONFERENCE NAME/SPONSOR: _____

DATES: _____ LOCATION: _____

Applicant must attach flyer or web page to support request.

AMOUNT REQUESTED: \$ _____
Registration Fee: _____ Travel Expense: _____ Lodging: _____ Food: _____

1. HOW YOUR ATTENDANCE AT CONFERENCE ADDRESSES STRATEGIC PRIORITIES AND GOALS. (40 POINTS)
Refer to https://www.hartnell.edu/ipre/strategic-planning/strategic_plan_2019-24.pdf . Attach additional pages for response(s) if needed.

2. HOW YOUR ATTENDANCE WILL IMPROVE STUDENT LEARNING AND SUCCESS. (40 POINTS)

3. ON RETURN, YOUR PROPOSED PRESENTATION VENUES/AUDIENCE (20 POINTS)

4. OTHER POSSIBLE FUNDING SOURCES FOR TRAVEL/CONFERENCE (indicate status of other requests)

5. DATE OF YOUR LAST FUNDED TRAVEL

ACCEPTANCE & INITIALS:

_____ I have read and understand the guidelines established for the Hartnell College Conference/Travel Funds Program.

_____ I will abide by Hartnell College policies during this travel, including submitting proof of expenses after the travel. I understand that funding will be restricted to those items specifically allowed, including a per diem limit on food.

_____ I understand that following the completion of this travel, I will be required to make two presentations and will submit documentation to the Professional Development Committee.

APPLICANT'S SIGNATURE

DATE:

SUPERVISOR'S NAME

SUPERVISOR'S SIGNATURE

DATE:

REC'D TIME: _____ REC'D DATE: _____ BY: _____ ASSIGNED # _____