FACULTY SCHOLARSHIP PROPOSAL Valdosta State University Funding Category B: Course/Curriculum Development

	Funding Category B: Course/Curriculum L	Jevelopme	nt
Faculty Member		Date	
Title and			
Department			
E-mail address			
Description of			
proposed activity			
(Include dates of			
travel, location,			
and nature of work			
to be conducted)			
Outcome of			
activity (Provide a			
detailed rationale			
as to how these			
sessions will			
facilitate the			
redesign of an existing			
course/curriculum,			
or the			
development of a			
new			
course/curriculum)			
Provide an			
explanation or			
rationale as to why			
the information or			
skills offered are			
not available in			
print or through			
internet			
discussion groups			
or other means			
Provide the			
expected number			
of students who			
will be benefited			
from this activity			
	Transportation Cost		
	2. Automobile Rental		
Budget	3. Registration Fees		
(Enumerate costs	4. Hotel		
and describe	5. Meals		
nature of costs to	6. Ground Transportation (taxi, etc.)		
be incurred)			
	7. Other (parking, phone, etc.)		
	Total Cost =		
Other financial			
support			
Amount of grant			
requested (one time FY award of			
\$1000) July 1 st –			
June 30th			
Julie Juli	<u> </u>		

Applicant's Signature (By signing this application you agree to submit your expense report by within 60 days of return from travel)		Date	
Dept Head Signature		Date	
Dean/Director Signature		Date	
Proposal Submission Instructions	Submit via DocuSign routing as follows: Applicant (for signature) Department Head (for signature) Dean (for signature) Ms. Anita Bosch (as a cc:)		
Any publicity of the granted activity should mention funding from the Office of Faculty Scholarship			