

CAS Professional Development Program

Application for Funds

Complete the Section A and B and submit this form (along with conference attachments) electronically to Alecia Kimbrough (akimbrough@unl.edu) for circulation to the CAS Staff Council. A hard copy with signatures should also be routed to 1223 OLDH (0312).

Section A: Employee completes			
Name:		Date Requested:	
Date Needed:			
Request:			
Cost Estimate:			
Suggested Vendors:			
Documentation attached? (Y/N)			
Business Rationale for Request (How does this training relate to your job responsibilities and/or career aspirations within the Department/College?)			
How will the training benefit your unit: 'Is the training directly related to one of your job duties, or a task that will enhance your unit's operations?' Describe the task.			
Does the item requested benefit more than one staff, students, or faculty in your unit? If so, how?'			

How will accountability be established: 'How will the awardee share knowledge learned and/or incorporate the new skills in current job?'			
How will job functions be covered while employee is absent (if applicable)?			
Section B: Department Chair/Unit Budget Administrator Completes			
Does the Department Chair or Unit Budget Administrator approve the request (Y/N)?			
Will any departmental/unit funds be allocated towards this purchase? If so, indicate amount or rationale for no unit contribution.			
Department Chair/Unit Budget Administrator Signature			
		Date	
Section C: Committee Action			
Action:		Date:	
Comments:			
Section D: Purchase Details			
Final Cost:		Date:	
Vendor(s):			