



# Staff Development Application

## Staff Council

Please complete this form and forward to the Staff Development Chair, Bevan Burgamy, at least ten working days prior to the workshop/seminar/class. The registration form for the event and GC Purchase and Check Request form (available at <http://info.gcsu.edu/intranet/forms/>) must be submitted with the Staff Development Application. Guidelines for use of Staff Development funds may be found at <http://www.gcsu.edu/staffcouncil/guidelines.htm>.

Staff Development money is available for classified personnel to attend work-related seminars, conferences, workshops, and Continuing Education classes on-campus, off-campus and online. You may apply to the Staff Development Chair to pay the cost of your registration fee up to \$200 per person, per 6 months (January-June & July-December). Funding will be limited to one person per department/unit for a similar professional development opportunity within the same period. Staff Development funds does not pay for transportation, workbooks or food.

### Procedure for Applying for Staff Development Funds:

1. Fill out the registration form for your event and the Staff Development application.
2. Fill out a GC Purchase and Check Request form as follows:

Deliver to: Bevan Burgamy, Staff Development Chair, CBX 043

Vendor: Organization in charge of event

Requested by: Your name

Approved by: *Leave Blank*

Description: Title and date of seminar

3. Send, fax, or hand-deliver all of the above to Bevan Burgamy, 318 LITC (3<sup>rd</sup> floor), CBX 043, Fax: (478) 445-6847.

If you need any forms or have any questions, please call Bevan Burgamy (478) 445-0980. If you are unable to attend an event that you are registered for, please notify Bevan Burgamy immediately. Remember that a seminar unattended wastes money that someone else could have used.

Please complete this section.

#### EMPLOYEE INFORMATION

Name \_\_\_\_\_

Department \_\_\_\_\_

Title \_\_\_\_\_

Campus Box \_\_\_\_\_

Office Phone \_\_\_\_\_

Today's Date \_\_\_\_\_

Are you a staff member? Yes      No

Have you completed your six month probationary period?

Yes      No

Do you work at least 20 hours per week? Yes      No

Do you have access to departmental funds to pay for your event?

Yes      No

Account Number \_\_\_\_\_ Amount \_\_\_\_\_

Approval Signature \_\_\_\_\_

#### WORKSHOP/SEMINAR/CLASS INFORMATION

Name of Event \_\_\_\_\_

Date of Event \_\_\_\_\_

Location \_\_\_\_\_

Cost of Event \_\_\_\_\_

Deadline \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

How does this relate to your job? (Be specific.)

#### For Staff Council Use Only

Approved      Denied      Reason, if denied \_\_\_\_\_

Staff Development Chair Signature \_\_\_\_\_ Today's Date \_\_\_\_\_