

**NTID Faculty Evaluation and Development (FEAD) Grant
APPLICATION**

Applicant Name: _____ **Date:** _____

Department: _____

Status (please check one): Tenured Faculty Tenure-Track Faculty
 Principal Lecturer Sr. Lecturer Lecturer

Co-Applicant(s)/Department(s): _____

Project Description

Describe the professional development activity you are proposing. Include general objectives of the proposal, specific planned activities and expected outcomes, and project timelines. If the proposal is to run beyond one fiscal year (October-September), divide activities into Phase One and Phase Two.

Activity Timeline (be specific):

Project Narrative

State how this activity directly relates to your professional development requirements as outlined in your Plan of Work:

Breakdown of proposed costs:

Travel (include transportation, lodging, meals, and other related fees) \$ _____

Conference Registration (attach brochure) \$ _____

Supplies \$ _____

Software \$ _____

Postage \$ _____

Research and Testing \$ _____

Other (explain) _____ \$ _____

Total Estimated Costs: \$ _____

****Save All Receipts****

Source(s) of funding:

 Department support \$ _____

 Other revenue support \$ _____

Total FEAD Requested: \$ _____

Applicant's Signature _____ **Date:** _____

AVPAA Internal Use Only

FEAD Application Received _____

AVPAA Budgetary Review _____

Sent to FEAD Committee _____

FEAD Committee Rec/Feedback to AVP _____

FEAD Award Amount _____

Funding Source:

 NTID FEAD Operating _____

 Provost FIF Fund's _____

AVPAA Official Notification to Applicant _____

JE/Reimbursement Receipts due by _____

Applicant's Evaluation Report due by _____