Martha Wood Faculty Development Grant Application

Name of Applicant		
College/School	Department	
Rank:		
Adjunct		Associate Professor
Instructor	Assistant Professor	Professor
Number of Years at Clayton St	ate:	

Current Teaching Schedule:

Course ID	Course Title	Section	# of Students

Topic of Faculty Development

(e.g., critical thinking, problem-based learning, cognitive development, etc.)

Level of Faculty Involvement (e.g., conference presenter, officer in sponsoring organization, etc.)

Description of Faculty Development (conference, workshop, research, etc. Be sure to include dates that the activities would occur))

Expected Impact (on Teaching Methodology or Program Activities)

Itemized Budget

Item	Budgeted Amount
Travel	
Conference Registration	
Course Release	
Equipment	
Supplies	
Other (specify, attach additional documents as needed)	
Total	

Signatures

Applic	icant:	
	Printed Name:	
	Signature:	_
	Date:	
Depar	artment Head:	
	Printed Name:	
	Signature:	
	Date:	
Dean:	1:	
	Printed Name:	
	Signature:	
	Date:	