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**Graduate Student Professional Development Reimbursement Award**

**Application**

 **Application**

**Eligibility**

1. Registration fees for a virtual professional development event (e.g. webinar or digital conference) in the applicant’s field and/or directly related to their program or thesis project (through July 31, 2020).
2. The applicant is a matriculated graduate student in good academic standing, at the time of application and at the time of travel.
3. Only ONE award per student per fiscal year (“Fiscal year” means the fiscal year in which the event and reimbursement takes place, not the notice of award)
4. The applicant MUST have already registered for event they are requesting reimbursement for.
5. The applicant MUST have a faculty sponsor. The faculty sponsor will review and forward this application to RSI.
6. The travel MUST NOT be part of a credit-bearing program.

**Funding**

* **Up to $300 –** to virtual attend a webinar or digital conference in the applicant’s field and/or directly related to their program or thesis project.

Awards are made on a rolling basis until funds are exhausted. Therefore, it is in the student’s best interest to apply as early as possible, and ***all applications must be received at least one week before the event takes place in order to be reviewed.*** Award is not guaranteed. *All expenses incurred prior to approval are at the student’s own risk.*

**Application**

**Student Name:**

**Student Email Address:**

**Preferred Telephone Number:**

**Anticipated Date of Graduation:**

**Department/Program:**

**Name of Faculty Sponsor:**

**Sponsor’s Email:**

**Name of Webinar or Virtual Event:**

**Event website:**

**Date(s) of Event:**       through

**(If presenting) Poster/Abstract/Project/Event Title:**

**Brief description** of the scholarly activity and explain why this professional development opportunity is important to your scholarship or degree program (Limited to 400 words):

**Required PDF Attachments** (Applications without these documents will NOT be considered complete)**:**

* Copy of your acceptance letter or email to present (if presenting)
* Copy of your current unofficial transcript

**Itemized Costs** (as totals for each participant. Total request may not exceed $300):

* Registration fees, if applicable: $

**Total Request** (cannot exceed $300): $

**Check the appropriate box:**

* I understand that this application will be submitted to the Office of Research, Scholarship, and Innovation only after my faculty sponsor has approved it. YES [ ]
* I understand that registration expenses are processed on a reimbursement basis by the Office of Research, Scholarship, and Innovation. YES [ ]
* I understand that original expense receipts, Certification Form, and Student Payment Check Request must be submitted by email to the Office of Research, Scholarship, and Innovation (dmathew4@naz.edu) no later than 10 business days after the event. YES [ ]
* I understand payment cannot be processed until my summary is submitted by email to dmathew4@naz.edu and my faculty sponsor. YES [ ]

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Applicant’s Signature Date

STUDENT APPLICANT FORM ENDS HERE.

Student now sends ALL required documents (this form and required PDF attachments) to the faculty sponsor for review and completion of Faculty Approval section. The Faculty Sponsor must forward the complete GSPDA packet to Lisa Durant-Jones at ldurant4@naz.edu, with a copy to Debbie Mathewson at dmathew4@naz.edu.

NOTE: It is the student applicant’s responsibility to confirm that the faculty sponsor has completed this process.

**Faculty Approval of**

**Graduate Student Professional Development Award Application**

**Name of Faculty Sponsor**:

**Sponsor’s Email**:

**Department/Program:**

**Brief description** of your relationship to the student applicant(s) and the significance of the conference or event. (Limited to 100 words).

**Check the appropriate box:**

* I understand that this student’s GSPDA application will be submitted to the Office Research, Scholarship, and Innovation only after I’ve approved it. YES [ ]

Certifications

* I certify that, to the best of my knowledge, this student is eligible for a Graduate Student Professional Development Award.

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Faculty Sponsor’s Signature Date

SUBMIT APPROVAL

The Faculty Sponsor must forward the complete GSPDA packet as a single PDF to Lisa Durant-Jones at ldurant4@naz.edu with a copy to Debbie Mathewson at dmathew4@naz.edu. The subject line must include GSPDA: student name. Only one application per email and only emailed applications will be considered.**\***