COVER SHEET FOR 2024-2025 FACULTY DEVELOPMENT AWARD APPLICATION

Name of Applicant:			
	Printed Name	Acade	emic Title
Title of Proposal:			
Applicant's Signatu	re:		
Quarter Desired:	F	Released Course:	
Home Department:			
Phone:		Email	
Previous Faculty De	evelopment Award Re	ceived? YesNo If ye	es, Award Date:
Appointment Date:_			
This project will be	administered by the D	epartment of	
Administrative Cont	tact: Printed Name	Email	Phone
Department Chair N	√ame:		
Department Chair S	Signature: Departmo	ent Chair applications must be	e signed by Dean
Proposal Check L	ist:		
	у	um, single-spaced)	