

**Note: This form is not required if you used the fillable application form.**

**COVER SHEET FOR 2024-2025 AF PROFESSIONAL DEVELOPMENT AWARD APPLICATION**

Name of Applicant: \_\_\_\_\_  
Printed Name Academic Title(s)

Number of years of continuous service in academic title(s) \_\_\_\_\_

Title of Proposal: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Quarter or Timeframe Desired: \_\_\_\_\_

Home Department: \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Previous Professional Development Award Received? Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_

This project will be administered by the Department of \_\_\_\_\_

Department Administrative Contact: \_\_\_\_\_  
Printed Name Email Phone

Department Chair Signature: \_\_\_\_\_  
Department Chair applications must be signed by Dean

Dean's Signature: \_\_\_\_\_  
Dean's signature only required if Department Chair is the applicant

**Proposal Check List**

\_\_\_\_\_ Cover Sheet (signed)

\_\_\_\_\_ Service Activity in the last four years (if applicable)

\_\_\_\_\_ Proposal (5 pages maximum, single-spaced)

\_\_\_\_\_ List of Publications in the last four years (if applicable)