

FACULTY/STAFF PROFESSIONAL DEVELOPMENT FUND

PURPOSE

To aid in the cost of professional development for full-time faculty and staff of Piedmont Community College to benefit the recipient and the College. Professional development is defined as learning state of the art procedures and knowledge for the growth and development of the individual and for the benefit of Piedmont Community College.

GUIDELINES

The maximum amount awarded for each individual shall not exceed \$500 per fiscal/academic year on a reimbursement basis. Any applicant who qualifies for financial aid including the Pell Grant is not eligible for these funds.

Monies approved from this program must not be used to supplant institutional funds. Development programs funded by the institution, such as workshops and seminars conducted for employees to fulfill their present job responsibilities will not be funded by this program.

The course(s) work must address specific objectives in one's professional growth directed toward an employee's first terminal degree, diploma, or certificate from a recognized accredited institution of higher learning.

The employee is obligated to continue employment with the College for a minimum of 2 years (24 months) after completing the professional development objectives. A prorated payback will be due based on the number of months remaining of the 2-year (24 months) commitment should employment be discontinued.

PROCEDURE

The applicant will submit a request for The Professional Development Fund which will include a syllabus or complete course description of the course(s) the applicant will pursue, as well as proof of class completion (final grade or transcript). The request for funding must be submitted through the employee's immediate supervisor to the appropriate Vice President. The Vice President will initial the request, signifying approval with comments, as appropriate. The Vice President will submit the request to the Vice President, Advancement & Communications.

REVIEW AND SELECTION PROCESS

The Faculty/Staff Development Committee will review the request and upon approval, the applicant will be notified. The applicant should keep all receipts applicable to the course work and turn the receipts into the Foundation office. Reimbursement will be made upon the receipts not to exceed the amount approved.



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		Date Submitted:
	Name (Please print or type)	
	Home Mailing Address	Phone ()
	City, State, Zip Code	
-	Position	Division/Department
5.	Course Description	
	Educational Institution	
		(name of college, etc.)
		(mailing address-Street & P. O. Box)
		(city, state, zip)
	Date(s) of Course(s)	
	Cost	
	Other Information	
١.	Specific Objectives to be met in	ι your Professional Development (you may attach a copy of you

 Specific Objectives to be met in your Professional Development (you may attach a copy of you Professional Development Plan if you desire).

5.	How will this	course(s)	benefit	Piedmont	Community	v College?

ACKNOWLEDGEMENT OF APPLICANT

I have received and read a copy of the criteria and procedures for the Faculty/Staff Professional Development Fund, and I acknowledge my obligation to comply with them if this application is approved. In the event that I leave the employment of Piedmont Community College (the "College") for any reason within two years (twenty-four months) after completing the professional development course(s) funded by the grant, or if I otherwise fail to comply with the applicable criteria and procedures, I agree to repay the amount of the fund to Piedmont Community College Foundation (the "Foundation"). This repayment obligation will be prorated if it is triggered by my separation from the College prior to the two-year (twenty-four month) period referenced above.

If any sums owing hereunder remain unpaid at the time of my separation from the College, this amount may be deducted from any monies due me from the College and paid directly to the Foundation. I further authorize a copy of this acknowledgement to be placed in my College personnel file and to remain a part thereof as long as any of the provisions hereof remain in effect. My signature hereunder shall constitute the representations herein contained a promissory note, evidencing all obligations arising hereunder.

Applicant

Date

I have reviewed this request and agree that the course as outlined falls within the scope of the applicant's professional development.

Supervisor			Date	Vice President	Date
	FOR	PROFESSION	AL DEVELOPM	ENT COMMITTEE USE ONLY	
Approved	□ Denied	Date:		Amount Awarded: _	
Number of Previ	ous Awards:		ulative Amount:		
COMMENTS:					

Revised 4/20/2021