

APPENDIX I

College of Micronesia-FSM Staff Development Program

Application for Educational Leave

Name: _____ Date _____

Division/Activity: _____

Program for which you have been accepted: (Attach letter of acceptance, catalogue and brochure describing the program, and letter of recommendation from supervisor.)

Program Location: _____

Starting Date of Program: _____

Projected Date of Program Completion: _____

Degree to be Earned: _____

Itemized costs involved in attending the program (be specific, use a separate piece of paper if necessary):

List scholarships, grants, loans or other financial resources available to you to help with the program costs:

Financial assistance sought from COM-FSM:

Write a brief essay on how completion of this program would benefit COM-FSM and enhance your commitment to the College. Use A separate piece of paper and attach it to this application.

APPENDIX I (Con't)

College of Micronesia-FSM

Staff Development Request for Funding

Category for which funding is requested:

- Degree Program
- Associates Degree
- Bachelor Degree
- Master's Degree
- Doctorate Degree
- Conference/Workshop
- On-Island
- Off-Island
- Mini Grant
- Guest Speaker
- Other (specify)

Proposed Staff Development Activity

Location:

Starting Date:

Ending Date:

Funding Sources

- Staff Development Funds
- Grants
- Other (specify)

Total amount requested:

Name:

Department

Signature of Applicant

Date

Signature of Supervisor

Date

Signature of Department Head

Date