

CUPFA – PROFESSIONAL DEVELOPMENT – PROPOSED BUDGET

Applicant:	Employee #:	Email or telephone:
Faculty:	Department:	Date: <small>mm/dd/yy</small>

CONFERENCES, WORKSHOPS, TRAINING ETC.
(If necessary, please complete travel form as well)

Name of Conference, Workshop, etc.

Location	Start Date <small>mm/dd/yy</small>	End Date <small>mm/dd/yy</small>

Registration, Materials, etc.

Description (Please be specific)	Amount	Awarded (for committee use)
TOTAL →		

TOTAL Requested	TOTAL Awarded

Grand TOTAL (all forms)	Requested	Awarded