**PASA Development Fund Application**

**Please check quarter submitting for:**

[ ]  August-October [ ]  November- December [ ]  January- March [ ]  April- July

**Name:** Click or tap here to enter text. **Telephone ext.:** Click or tap here to enter text.

**Department:** Click or tap here to enter text. **Campus:** [ ]  **JT** [ ]  **Olean** [ ]  **DK Status:** [ ]  **FT** [ ]  **PT**

**Please answer the following questions. Provide a thorough, clear, and concise description of the activity. If the committee needs more information, you will be asked to provide details. Both the decision on your request and possible disbursement of funds could be delayed.**

**1. Nature of Activity- Briefly describe here the nature of the activity (including dates and location):**

Click or tap here to enter text.

[ ]  **Supporting documents attached: program, descriptions, and fees electronically, if available.**

**2. Have you been funded for a similar experience in the past?** [ ]  **Yes** [ ]  **No**

 **If yes, what activity and when?** Click or tap here to enter text.

**3. How will this activity contribute to your professional development?**

Click or tap here to enter text.

**4. Specifically, how will this activity benefit the college? Are other college members also attending?**

Click or tap here to enter text.

**5. Financial**

* What is the total activity cost?Click or tap here to enter text.

[ ] Expense report attached

* Have you requested funds from other sources? If so, how much?

|  |  |  |
| --- | --- | --- |
| Source | Amount Requested | Amount Received |
| Department Budget |  |  |
| PASA Fund  |  |  |
| Employee pay |  |  |
| Other source |  |  |

**Choose payment method:**

\_\_[ ] \_\_ Make check payable to JCC Budget #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_[ ] \_\_ Make check payable to employee

\_\_[ ] \_\_ Make check payable to third Party \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**When your application is complete, type your name and date below, acquire your supervisor’s approval (signature), and forward this application and supporting information via email to Amy Rupp.**

**Employee:** Click or tap here to enter text. **Date:** Click or tap here to enter text.

**Supervisor:** Click or tap here to enter text. **Date:** Click or tap here to enter text.

**FOR COMMITTEE USE ONLY**

* Date committee received application Click or tap here to enter text.
* Was supporting documentation attached? Click or tap here to enter text.

**Committee Outcome**

[ ]  Approved [ ]  Denied [ ]  On Hold

If approved, in the amount of Click or tap here to enter text.

Additional notes: Click or tap here to enter text.

Date sent to Business Office Click or tap here to enter text.

Date PASA member was notified of outcome Click or tap here to enter text.

**Funding Balance**

Maximum eligibility to date Click or tap here to enter text.

Amount approved at this request Click or tap here to enter text.

New eligibility for year Click or tap here to enter text.

**Budget Information**

Human Resources Budget Code Click or tap here to enter text.

Comments Click or tap here to enter text.

Accounts Payable Click or tap here to enter text.