

# WCCFT Adjunct Faculty Professional Development Fund Application

## 2021-2022



### ELIGIBILITY:

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You must have completed a minimum of three (3) years with Westchester Community College, with at least one teaching/counseling/librarian/Academic Support Center assignment per academic year, and have been employed at least one semester during the academic year for which this application is being made. (It need not be the semester in which the activity was completed). Verification of these criteria must be obtained by your School Dean in order for this application to be considered.

**You must be a member of the WCCFT at the time of the activity.**

This application form is for activities completed between September 1, 2021 and August 31, 2022.

### APPLICATION INSTRUCTIONS:

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You may apply for reimbursement for expenses incurred for a conference, workshop, class, professional research or similar professional activity. Please include:

- documentation in the form of receipts (credit card bills are not sufficient)
- confirmation of the activity, such as certificates, conference announcement, conference brochure that includes the sponsoring organization, the location and the dates.
- supporting documentation for any mileage (e.g., Google maps)

For professional activities, the union will reimburse for expenses integral and necessary to complete the project, for example, travel (with justification of the need), lab use, archival access, photocopying. All reimbursements are only for expenses pertaining to the activity itself. We do not reimburse for membership fees for professional organizations or subscriptions to journals.

Your award will depend on the amount of funds available and the total number of applications received from adjunct faculty for this period. The total fund will be divided amongst all the applicants with a maximum of \$2000.00 to be paid to any one member. You may receive no more than 100 percent of the cost of the activity from all sources of funding.

All receipts and evidence of each activity must be submitted with this application otherwise it will not be considered. Please organize them so that they are easy to read.

### SUBMISSION DEADLINE:

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Applications for WCCFT Adjunct Faculty Professional Development Funds for September 1, 2021 to August 31, 2022 should be received by: **October 31, 2022**

Total award for each person for both October and March application periods cannot exceed \$2000.00.

Please make a pdf of your completed application and email it to [gwenrewccft@gmail.com](mailto:gwenrewccft@gmail.com)

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For questions email [gwenrewccft@gmail.com](mailto:gwenrewccft@gmail.com)

Please complete and email to [gwenrewccft@gmail.com](mailto:gwenrewccft@gmail.com) by October 31, 2022

Name:	Phone Number:	
Address:		
City:	State	ZIP Code
Course(s) Taught:		

Please itemize expenses and attach receipts on the next page.

- Meals: Please note the current maximum amount funded per day is \$60
- Mileage: Please include supporting documentation (e.g. Google Maps). Claim must be based on the current reimbursement of .58.5 cents per mile-January 2022-June 2022, and .62.5- July 2022-present.

Did you receive funding for these activities from any other sources? If so, please specify the amount and source using the following table.

Amount Received:	Source:
\$	
\$	
\$	
Total Received:	

Subtract Total Received from Total Expenses (listed on the following page) to determine Total Request.

Total Request: \$ \_\_\_\_\_ (maximum \$2000.00)

Signature:	Date:
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**PLEASE HAVE THIS PORTION OF THE APPLICATION COMPLETED BY YOUR SCHOOL OFFICE.  
You can email this text to your school office. The Dean or the office can email it back to you or  
directly to me.**

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The applicant, \_\_\_\_\_ (enter name of applicant) has completed a minimum of three (3) years with Westchester Community College, with at least one teaching/counseling/librarian/Academic Support Center assignment per academic year, and has been employed at least one semester during the academic year 2021-2022 in the School of \_\_\_\_\_ (enter name of school).

Signature of Dean:	Date:
Print Name:	

**Expenses – Use multiple forms if necessary and attach copies of receipts and evidence on separate pages.**

	<b>Activity 1</b>	<b>Activity 2</b>	<b>Activity 3</b>	<b>Activity 4</b>
Description				
Location				
Date(s)				
<b>Expenses</b>				
Air/Rail				
Car Rental				
Lodging				
Registration				
Mileage				
Other (specify)				
<b>Meals (\$60 per day max)</b>				
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				
<b>Total Expenses</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>