

PROFESSIONAL DEVELOPMENT GRANTS AND SCHOLARSHIPS

(Evaluation Form)

Name _____
Last First

Type of grant received:

_____ Professional Development Grant

_____ Scholarship

Please provide an evaluation of the program you attended, including the following information:

_____ Title of program/course

_____ Goal/Objective to be achieved through participation in this program/course

_____ Statement including relevance to your position, goal fulfillment, and positive/negative aspects of the program/course

_____ Information which you could share which may be of value to others

_____ Statement of actual expenses (including all expenses, even if they were not covered by the grant)

This report is due within 60 days of the event or 60 days after approval of funding, whichever is later. Your award reimbursement will be processed upon approval of this evaluation report.

Signature _____ Date _____

Please return three copies of the evaluation form and supporting documents to:

Current committee chair