Total Amount Requested: $ Revised 08.21.25

**FACULTY DEVELOPMENT for part time faculty**

***Application for funding***

The Faculty Development Fund for Part-Time Faculty is designated to support activities that will enhance your teaching and/or contribute to your professional development, e.g., attending a professional meeting to network/interview for faculty positions. Activities that are supported by Faculty Development Funds include, but are not limited to the following:

* Conference travel (preference is given to those presenting scholarly or creative work or participating in the conference program, or participating in interviews)
* Conference, workshop or symposia attendance: support for acquisition of specialized skills or knowledge of new methods, theories or technologies that will enhance teaching activities

Part time faculty are eligible for up to $500 of faculty development funding. Please apply by the spring or fall deadline in advance of your proposed activities.

**NOTE: Proposed activities must occur while you are employed by Wake Forest University.**

**Please read** [**HELPFUL HINTS**](http://college.wfu.edu/research-scholarship-creativity/funding-opportunities/) **found on the** [**Faculty Funding site**](http://college.wfu.edu/research-scholarship-creativity/funding-opportunities/) **prior to completing this application.**

Name:

Department:

Academic Rank:

Dates of appointment *(visiting or temporary only)*:

**Project Details:**

 *(All fields will expand as you type)*

1. Project description and significance to the field: Proposals should be written for educated non-specialists and should be free of jargon.

*(Describe your project in the context of a larger research agenda, both in terms of your past work and future trajectory.)*

1. Proposed Activities:

*(Describe in detail what activities will be accomplished, keeping in mind the activities that can be supported by this fund.)*

1. Expected Outcomes:
2. Proposed Project Duration: From: (Start Date) To: (End Date)
* *Include a detailed timeframe outlining activities to be undertaken and projecting when the project might be completed.*
* *If you have other commitments or overlapping obligations during the proposed project period, please indicate how your time will be allocated.*
1. Detailed budget including supporting documentation regarding travel and lodging cost (see sample budget below):

|  |
| --- |
| **Sample Itemized Budget**  |
| **Destination:**  | **Travel Dates:** |
| **Description of Expense** | **Amount** |
| Roundtrip airfare ticket (example GSO-London)  | $ |
| Transportation (mileage, streetcars, bus, train, etc…)  | $ |
| Conference Fees (registration, etc…)  | $ |
| Hotel (amount per night multiplied by number of nights)  | $ |
| Meals and Incidentals:$50 Domestic; $75 International(Hotel reimbursements may not go over rate of conference hotel) | $ |
| Miscellaneous (photocopies, microfilms, library fees, supplies etc…) | $ |
| **Total Amount Requested** | $ |

1. Previous Internal Award History (please indicate WFU awards received in the past 3 years):
2. Please attach a current CV to this application.

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*Signature of Applicant* Date

**To be completed by Department Chair:**

|  |
| --- |
|[ ]  This project should be funded |
|[ ]  This project should be partially funded |
|[ ]  This project should not be funded |

Chairs are asked to vet proposals to ensure that applicants have provided all information requested above, and that it is comprehensible to an educated audience of non-specialists. Chairs should indicate whether they endorse the particular project proposal in terms of its teacher-scholar relevance, viability, and necessity. In the case of conference travel or funding requested to support performance or exhibition of creative work, the chair is asked to provide an evaluation of the quality and selectivity of the conference, workshop or exhibition venue.

**Please provide your rationale here:**

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*Name of Department Chair or Equivalent* Date

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Signature of Department Chair or Equivalent*

*Document to be submitted by department chair to* *Carol Sowers**.*