**Bonner Center for Community Engagement**

**ACE Faculty Conference Grant Application**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus Phone: ext.\_\_\_\_\_\_\_\_\_\_ Campus Box: \_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TO: PROVOST & FACULTY ASSOCIATE, Bonner Center for Community Engagement**

**THROUGH: CHAIR, Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Comments/Recommendations (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature Date

**THROUGH: DEAN, School of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Comments/Recommendations (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature Date

**GRANT AMOUNT REQUESTED (up to $1,000):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Conference Name)**

**DATES: ­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DESTINATION: ­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PURPOSE:**  \_\_\_\_\_ Professional Development \_\_\_\_\_ Poster/Paper/Workshop Presentation

\_\_\_\_\_ Panel Discussant/Moderator \_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**JUSTIFICATION:**

Attach short responses to the following prompts:

1. What do you hope to gain from participating?
2. How does attendance inform your professional goals?
3. What is your past experience with professional development on academic community engagement?
4. How might you share what you learn with the Berry community

Also, if presenting, please include a brief abstract.

**PROPOSED BUDGET:**

|  |  |
| --- | --- |
| **ITEM** | **COST** |
| **Conference Registration\*** | **$** |
| **Travel** | |
| **Airfare \*** | **$** |
| **Car Rental (#\_\_\_\_\_\_\_\_\_\_ of days @ $\_\_\_\_\_\_\_\_\_\_ per day)\*** | **$** |
| **Personal Auto (#\_\_\_\_\_\_\_\_\_\_of miles @ $0.50 per mile)** | **$** |
| **Parking** | **$** |
| **Lodging (#\_\_\_\_\_\_\_\_\_\_ of nights @ $\_\_\_\_\_\_\_\_\_\_ per night)\*** | **$** |
| **Meals (# \_\_\_\_\_\_\_\_ of meals excluding those included in conference fees or with lodging)** | **$** |
| **Other: (please itemize & explain – attach an additional sheet if necessary)** | **$** |
| **TOTAL ESTIMATED EXPENSES** | **$** |

*\*Attach supporting documentation (i.e., conference registration, flight itineraries, lodging bookings.)*

Have you applied for other funding to attend this conference? \_\_\_\_\_ YES \_\_\_\_\_ NO

If so, what funding and how much do you anticipate receiving from other sources? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you received this grant previously? \_\_\_\_\_ YES \_\_\_\_\_ NO If so, when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICANT’S AGREEMENT:**

The applicant agrees to spend all the funds allotted by June 30.

The applicant agrees to contact the Bonner Center Faculty Associate as soon as possible if the applicant finds that allotted funds will not all be spent. This will allow the committee to award remaining funds to another faculty member.

Please initial showing you understand and agree with the stipulations listed above. \_\_\_\_\_\_\_\_\_\_

***Applications should be submitted by October 1 to the Bonner Center Faculty Associate***

***Dr. Julee Tate – Evans 206B.***