

## Management Association Professional Development- Request for Funding

**Requestor:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Email:** \_\_\_\_\_@pasadena.edu      **Phone:** (626) 585-\_\_\_\_\_

**Type of Activity:** Training \_\_\_\_ Speaker \_\_\_\_ Retreat \_\_\_\_ Materials \_\_\_\_ Webinar \_\_\_\_  
Other \_\_\_\_\_

**This is:** an individual request \_\_\_\_\_ a group request \_\_\_\_\_

**Participant(s):** \_\_\_\_\_

**Name of Activity:** \_\_\_\_\_

**Date(s) of Activity:** \_\_\_\_\_

**Description of Activity:** (Attach additional information if necessary)

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Briefly state how your proposed activity will enhance your professional growth, increase productivity of the organization and/or meet changing institutional needs:

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How do you plan to share what you have learned with the campus community?

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Please state any other information for consideration of this request:

**Estimated Costs:**

|                                                    |  |
|----------------------------------------------------|--|
| Registration/Fees                                  |  |
| Transportation                                     |  |
| Lodging                                            |  |
| Meals                                              |  |
| Materials                                          |  |
| Taxi/Parking /etc.                                 |  |
| <i>Other</i>                                       |  |
| <b>TOTAL ESTMATED COST</b>                         |  |
| <i>Other funding source amount (if applicable)</i> |  |
| <b>TOTAL AMOUNT REQUESTED</b>                      |  |

*Please Describe any other costs listed:*

*Please specify other funding source:*

Management Association Board- Amount Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ Date: \_\_\_\_\_