MISSOURI SHOW-ME CHAPTER
APPLICATION FOR PROFESSIONAL DEVELOPMENT FUNDING

DATE OF APPLICATION: ________________  MEMBER OF SWCS FOR _____ YEARS.

NAME: ___________________________________________________________________________________

ADDRESS: ______________________________________________________________________________

DO YOU CURRENTLY HOLD, OR HAVE YOU IN THE PAST HELD, A State, REGIONAL, NATIONAL OFFICE
OR COMMITTEE ASSIGNMENT IN SWCS? IF YES, WHAT LEVEL OF INVOLVEMENT?
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

EVENT: __________________________________________________________________________________

DATE(S): ___________________________ LOCATION: _____________________________________________

YOUR PURPOSE FOR ATTENDING: (i.e., Receiving an award, citation, or commendation; Receiving a scholarship;
Presenting a technical or topical paper or poster; Training (providing or fulfilling a training need); National SWCS Officer
or board member; Chapter Delegate; Chairperson or member of a regional SWCS committee or task force; Other).
________________________________________________________________________________________

IF YOU APPLIED FOR EMPLOYER'S FUNDING PLEASE INDICATE WHAT, HOW MUCH AND IF APPROVED:
_______________________________________________________________________________________
________________________________________________________________________________________

CONSIDERATION OF TRAVEL EXPENSES WILL BE REIMBURSED AT THE CURRENT FEDERAL
GOVERNMENT TRAVEL RATES FOR EVENT LOCATION.
NUMBER OF NIGHTS: ______ PER DIEM: LODGING $ __________ M&IE $ __________ per day

REGISTRATION FEE FOR THIS EVENT: $ _______________ (attach a registration form)

MILEAGE: PLEASE INDICATE THE TOTAL AMOUNT OF MILES:
_________ miles @ $0.56 per mile = $ __________. __________.  AIRFARE: $ __________.

NOTE: Please file your application with the CHAPTER PRESIDENT as soon as you can to allow time for required action
by your Show-Me Chapter’s Executive Council. All Applications for Professional Development Funding must be acted
upon at a regular meeting and passed by majority vote of the council members present at that meeting.

Date application was acted upon by the Show-Me SWCS Chapter’s Executive Council: ____________________________

Approved  Disapproved  (Check one)

Date applicant was notified of the council’s action: ____________________________________________

__________________________, Chapter Secretary

REQUESTS MAY BE MADE FOR PARTIAL FUNDING TO THE EVENT AND THE EXECUTIVE COUNCIL MAY
ONLY FUND A PORTION OF THE REQUEST BASED ON THE AVAILABLE FUNDS.
RECEIPTS REQUIRED AFTER ATTENDANCE FOR REIMBURSEMENT TO OCCUR.

10/05/14