

Application for the Dean Barbara S. Stowe Faculty Development Award

Name of Applicant:

Academic Rank:

Department/Unit:

Campus Phone:

E-mail Address:

Agency or Conference Name:

Proposed Dates of Activity:

Title of Project:

Abstract or Brief Description of Proposed Activity (please limit your response to 250 words):

Attach a more complete description of the proposed activity (not to exceed two pages). Please address the following issues:

1. Describe the purpose of your activity related to teaching, research, and/or outreach.
 2. Describe how your activity/project will impact a public issue or public policy.
 3. Describe how you, K-State, and the College of Health and Human Sciences will benefit from this experience.
- If appropriate, attach a conference or seminar program announcement **or** letter of invitation from a mentor, indicating willingness to mentor you and accommodate your specific goals for professional development.
 - Describe how your duties at Kansas State University will be covered in your absence.

Budget (provide detail based on University policies):

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|--|--|
| Transportation: | |
| Airfare: | |
| Meals: | |
| Lodging: | |
| Other (Specify and Itemize): | |
| Total Budget: (maximum of \$5,000 from the Barbara S. Stowe Faculty Development Fund) | |

Signature of Applicant

Date

Signature of Department Head/School Director

Date

Submit the completed application as a PDF document to the designee of the College Awards Committee at fhooten@ksu.edu by March 1st.