GROSSMONT COLLEGE Professional Development Travel Funding Application Procedure for 2023-2024



the office of professional development faculty professional development committee classified staff professional development committee collegewide professional development committee

The College has limited funding available to Full Time Faculty, Adjunct Faculty, and Classified Professionals for conferences and training. Faculty and Classified Professionals may request up to \$500 annually (academic calendar) from the Professional Development Travel Fund to support travel to discipline specific and/or job- related conferences, training, and workshops. Faculty may request funds AND receive Professional Development Credit for conference attendance. The purpose of the funding is to enrich teaching and learning and/or to enhance skills/knowledge in job applicable skills. Any costs incurred over the \$500 must be covered by the individual(s) applying for the funding or through additional college resources that the requestor(s) must secure separate from this request. In other words, approval of funding request does not imply approval of any costs over the \$500. The final day to apply for funds will be April 30, 2024.

Plan to request funds or make a travel request at least 6 weeks prior to the conference date. Justification to attend the conference, training, or workshop is required. Incomplete requests cannot be processed. You will need to submit the following to your Division Dean / Manager:

- Conference Attendance/Travel Fund Request form (below)
- Request for Attendance at Off-Campus Activity," form (below)
- ❖ Use Account 1340002---5210 and indicate Professional Development
- ❖ Documentation regarding the professional value of the conference:
 - Link to Conference Website that includes: Name and description of conference, Conference Dates,
 Conference Location, Agenda Activity including the description of offerings. Meals cannot be reimbursed from this fund.
 - o Documentation of Costs (if making a funding request) including:
 - Conference Registration Fees
 - Lodging reservation quote (including cost of parking)
 - Transportation quote (MapQuest/Google Maps, and/or flight, train, shuttle, etc.)
 - *Note: GCCCD mileage rate for 2023 is 65.5 cents per mile.
 - *Note: Meals cannot be reimbursed from this fund.

Routing Information

- Return completed packet for signatures to your Division Dean
- Your Division Dean's office will route your completed packet to the Professional Development office to process the funding request.
- The Professional Development Office will do a budget check in order to approve the request.
- Once approved, the request will be routed to President's cabinet for approval to travel.
- Once your travel request has been approved, you will receive an email communication from the Grossmont Business Communications Services office (gcccd.edu) with your approved travel request.
 *Please know the process can take 4 to 6 weeks. Please be advised that travel is NOT approved until you the approved paperwork is returned.

To be **reimbursed for Travel**, submit the following **within two weeks after travel is completed**:

- Report on Conference Attendance submitted to: https://gcccd.co1.qualtrics.com/jfe/form/SV_cx3r3s1Sp7zhJLo
- Create an Expense Report in Workday (Please see the Expense Report training manual available in Workday)
- Upload the following items to your expense report
 - Copy of approved Request for Attendance at Off-Campus Activity form received from grossmontbcs@gcccd.edu
 - Hotel folio/receipt (Credit card receipts are not acceptable)
 - Transportation MapQuest/Google Maps for mileage (.655 per mile), and/or airline, train, shuttle, taxi receipts.
 - Scanned copies of parking receipts
 - $\circ \quad \text{Conference Registration receipt} \\$
 - Other original itemized receipts as approved
- Professional Development funding does not cover food expenses however other funding sources do so please note alcoholic beverages may not be reimbursed and such items may not appear on receipts. Please request a separate receipt for items you wish to be reimbursed for. Please only submit information/documentation for reimbursable expenses that were approved.

Conference Attendance/Travel Fund Request Form

Signatures:_____



the office of professional development faculty professional development committee classified staff professional development committee collegewide professional development committee

Name			collegewide professional development committe
D - 1 -			
Departmer	nt	Division/Unit	
☐ Full	time Faculty	☐ Adjunct Faculty	☐ Classified Staff
	requesting funds from the ease identify request amo	ne Professional Development Travel Fund unt below)	3
_	g		
(PI		is conference to satisfy my professional c ours requested. 6 hours per day maximur te	
 Su \$5 pro ap Su Lat If r giv A F mu 	00 maximum reimburseme of essionals. Faculty confer proved training. Classified anager. bmit all required forms to the submittals must include a request is denied, applicant ten the opportunity to appear the port on Conference Atten	g and all documentation at least six weeks print per academic year for full time faculty, actences must be in discipline, discipline relate conferences must be related to job description. The Division Dean's Office at least six weeks printed in the properties of the denial by the approperation of the denial by the denial by the denial by the approperation of the d	djunct faculty, and classified d, curriculum methods, or tion and approved by the unit prior to the conference start date. Indicate the conference start date. In the conference conference start date. In the conference co
Print Name		Signature	Date
Supervisor	/ Department Chair Signat	Date	
		rofessional Development Office):	
	n:Reimbursem		
	Reason for D		
Appealed Of	i. Ourcome of	AUUPal.	

GROSSMONT-CUYAMACA COMMUNITY COLLEGE DISTRICT REQUEST FOR ATTENDANCE AT OFF-CAMPUS ACTIVITY

GCCCD Office
Cuyamaca College
Grossmont College

District 001

NAME				DATE		
Ple	ease Type or Print					
This is to request institutional peri	mission to attend the	e activity descri	bed below:			
Title of activity:						
Sponsoring agency:						
Place of activity:		Dates and tin	nes of activity:	:		
Professional value:						
Is this a Staff Development Activit After attending this activity, I woul			to other staff	if appropriate: Yes] No 🗆	
ESTIMATED COST				TRAVEL PREPAYME	INTS AND CLAIMS (to be used	
LODGING:				by site Business Offi	ice only)	
MEALS:						
TRANSPORTATION:						
REGISTRATION:						
OTHER:				TOTAL PAYMENTS:		
TOTAL AMOUNT REQUESTED:	:					
	FUNDING AUT	HORIZATION	S AND TRAV	EL APPROVALS		
<u>Descriptions</u>	Account Number		Amount Requested	Amount <u>Approved</u>	Approval of Funding	
		TOTAL:				
Reimbursable by outside source:	Name of	Agency		Responsibility for Billing	_	
Site Business Officer		Dean/Director/Supervisor				
President/Vice Chancellor/Chance	ellor					

Rev 7/15/10