

**Excluded Professional Staff
Professional Development Fund (EPSPD)
Application Form**

Please submit to Athabasca University Human Resources

Name: _____ **Centre/Department:** _____

PD Activity: _____

Dates: _____ **Location:** _____

Proposed expenses (*refer to the AU travel policy*):

Airfare: _____

Ground Transportation: _____

Course Fees: _____

Conference Fees: _____

Accommodation: _____

Per Diem (*meals, etc.*): _____

Other (*please specify*): _____

Total Expenses: _____

Amount and sources of other funds available to you:

Conference/Society Rebates: _____

Other (Honorarium, Stipend, etc.): _____

Other (*please specify*): _____

Total other funds: _____

Total EPSPD Funds Requested: _____

Conference/Professional Development Information:

Conference title: _____

Your activity: _____

Title of paper/presentation (attach abstract and confirmation of invitation to participate) OR for Professional Development activity, describe the level of involvement and benefits to the individual, unit/department, or to the university:

Signatures:

Applicant

Date

Approval

Date