

**New York State/United University Professions
Joint Labor Management Committees**

**Individual Development Award Program
Application**

IMPORTANT NOTE: Prior to filling out the application,
download the application and save it to your files.

This application must be completed for consideration for the Individual Development Awards Program. Prior to completing this application, review the guidelines for the Program and read the Application instructions included on this form. After filling out this application form, print it, obtain the required signatures and submit it with all attachments as directed at the bottom of the form. Be advised that an incomplete application will not be considered.

Part A: Application Information

Name _____ Title/Rank _____

Email _____ Work Phone _____

Division/Program/Department _____

Campus _____

Work Address _____

Professional _____ Academic _____ Full-time _____ Part-time _____

Part B: Proposal Information

1. Date of proposed project or activity: From _____ To _____

2. Project or Activity Title _____

3. Briefly describe the proposed project or activity and its job relatedness in 1250 characters or fewer.

Section C: Budget Summary

Complete only sections that are applicable to your project or activity and specify the type of expenditure for each item. All expenditures must be itemized and justified below. If you received additional funding, please list the amount in the Campus Contribution (reimbursement from department) or Other Sources (award, grant, etc.). Employees may be funded for up to two projects or activities, not to exceed a total of **\$2,000** for the period of **July 2 – July 1**, of each year. A separate Budget Summary must be completed for each project or activity for which funding is being requested.

1. Travel and Related Expenses. Include a separate entry for each trip.

Trip A

Event Name: _____ Event Fee: _____
Dates _____ Location _____
Lodging Amt/Day _____ No. of Days _____ TOTAL _____
Meals Amt/Day _____ No. of Days _____ TOTAL _____
Transportation Mode _____ TOTAL _____
Amount Requested From:
Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

Trip B

Event Name: _____ Event Fee: _____
Dates _____ Location _____
Lodging Amt/Day _____ No. of Days _____ TOTAL _____
Meals Amt/Day _____ No. of Days _____ TOTAL _____
Transportation Mode _____ TOTAL _____
Amount Requested From:
Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

Trip C

Event Name: _____ Event Fee: _____
Dates _____ Location _____
Lodging Amt/Day _____ No. of Days _____ TOTAL _____
Meals Amt/Day _____ No. of Days _____ TOTAL _____
Transportation Mode _____ TOTAL _____
Amount Requested From:
Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

2. Tuition (at SUNY rate)

Institution: _____ Number of Credits: _____

Fee Amount: _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

3. Registration fees for conferences, seminars, workshops, etc.

Name of Event: _____ Fee Amount: _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

4. Entrance or access fees to institutions, or archives

Name of Institution: _____ Fee Amount: _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

5. Professional organization membership fee, where bundled with a free or reduced rate for conference or workshop attendance. or access fees to institutions, or archives

Name of organization/conference: _____ Membership fee regular _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

6. Fees for licensing or certification exam prep courses (e.g., USMLE Step 3 exam, medical board exam, or bar exam prep course, etc.)

Name of course: _____ Course fee _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

7. Fees for continuing education courses (e.g., CME or CLE courses)

Name of course: _____ Course fee _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

8. Other Expenses (Specify and include justification below)

Type of Expense: _____ Total Cost: _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

C. 9. Justification for Other Expenses

C. 10. Identify Other Sources

Part C: Budget Summary Continued

Complete this form for expenditures for costs associated with consumable artistic or research materials, short term use of specialized equipment or services, or publication. A supervisor's signature is required for expenditure requests in this section:

11. Fees for consumable artistic or research materials (e.g., reagents, antibodies, dyes, art supplies, sheet music) (include justification in C.17)

Type of Consumable: _____ Number of Items: _____

Cost Per Item _____ Total _____

Type of Consumable: _____ Number of Items: _____

Cost Per Item _____ Total _____

Initial here _____ to affirm that these consumable artistic or research materials are not available through your college or university, and that they cannot be purchased using other grant or research funding

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

12. Fees for short term use of specialized equipment or skills (e.g., sound mixing/engineering, recording studio fees, video recording and editing fees, performance space rentals, real time PCR testing, RNA sequencing) (include justification below)

Type of Equipment/Services: _____ Cost: _____

Initial here _____ to affirm that these facilities and services are not available through your college or university, and that they cannot be purchased using other grant or research funding.

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

13. Costs associated with publication (e.g., copyright or licensure fees, journal page charges, and stipends or fees for indexers, proof reading, translations). (Include justification below)

Type of Service/Item: _____ Cost: _____

Initial here _____ to affirm that these services or items cannot be purchased using other grant or research funding.

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

14. Other Expenses: (Include justification below)

Description: _____ Cost: _____

Amount Requested From

Campus Contribution _____ Other Sources _____ NYS/UUP JLMC _____

15. Expense Totals (This section does not automatically calculate. You must manually calculate the totals)

Campus Total _____ Other Source Total _____ NYS/UUP JLMC Total _____

C.16. Identify Other Sources

Justification Section C.17. Provide a brief justification for each category, including a rationale for why the expense is necessary for your project or activity and the proof of cost. For services also explain your choice of vendor or firm, including the process for selecting a single source vendor or firm, and describe the services being provided. For anyone hired to perform services for skills being provided, documentation affirming the professional credentials (e.g., resume, CV, recommendation from a publisher, etc.) must be included. (250 Words or less)

Part D: Acknowledgment and Signatures

I have read the Individual Development Awards Program Guidelines and General Program Information and understand that only documented expenditures pursuant to the procedures described in the program guidelines and approved by the Campus Professional Development Committee will be reimbursed. I understand that expenditures will be reimbursed subject to the New York State Comptroller's Rules and Regulations and that any changes to this project or activity, or expenditures included in the Budget Summary must be approved by the Campus Professional Development Committee. I also understand that the NYS/UUP Joint Labor-Management Committees must be acknowledged as a source of funding.

NOTE: Applicant's signature is required for expenditures requested for section C.9, C. 10, C. 16 and C, 17, Department, Program, Unit Head Signature is required for C.16 and C. 17

Applicants Signature Date

Department/Program/Unit Head Signature Date

Part E: Application Submission

Do Not Submit Your Application to the NYS/UUP JLMC Staff

A completed application and all required attachments must be submitted by the deadline date established by the Campus Professional Development Committee to your Campus Professional Development Committee

Contact the UUP Chapter Office or Human Resources Office for the Campus Professional Development Committee contact information

Part F: Required Attachments

All required attachments listed below must be submitted with the application.

- A description of the proposed project or activity including:
 - Type of event, event site, and sponsor.
 - Whether the employee is presenting a paper or formally participating. If presenting a paper, the title of the paper and nature of the presentation must be provided
 - A letter of acceptance of the paper being presented or other proposal. If acceptance is pending, the information should be submitted to the Campus Professional Development Committee as soon as possible.
 - How this project or activity will further the employee's professional development or otherwise assist in preparing for advancement.
- An updated brief curriculum vitae.
- A brochure, announcement, or other relevant material describing the project or activity. If material is not yet available, information should be sent as soon as possible.

For funds to support projects or activities that are not provided by the employee's campus, department, program, or through other funding sources, that require research materials, fees for short term use of specialized equipment, or services for skills, and costs associated with publication, the following must also be submitted:

- A justification for costs associated with research materials, fees for short term use of specialized equipment, or services for skills, and costs associated with publication.
- Proof of cost from a vendor or firm showing that a reliable vendor or firm was selected, and services or items purchased are at a reasonable cost.
- In instances where a single source vendor or firm has been selected, a justification and the process used to select the single source vendor or firm must be provided.
- For services for skills being provided, documentation affirming the professional credentials (e.g., resume, CV, recommendation from a publisher, etc.) for anyone hired to perform a service must be included.