



## Individual Development Award

**TO:** All Members of the UUP Bargaining Unit

**FROM:** Rowena Blackman-Stroud, President, UUP Downstate Medical Center Chapter  
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President - Downstate Medical Center

**DATE:** November 18, 2019

Application forms and guidelines are now available for the NYS/UUP Individual Development Award Program. **This application is for the period July 2, 2019 through July 1, 2020.** All eligible UUP bargaining unit members may apply for a maximum of \$1,000 to help support such activities as:

- **Small research projects**
- **Attendance at conferences or workshops**
- **Tuition for academic or Individual coursework**
- **Participation in internships**
- **Preparation of material for publication**
- **Participation in other activities that will help them in their professional development career at SUNY.**

Funding for the Individual Development Award Program ("IDA") is provided under the **2016-2022** Agreement between UUP and the State of New York. Decisions on granting the awards will be made by the campus Individual Development Committee, which is comprised of **four** members appointed by UUP and **four** members appointed by Management.

**\*\*Due to the large number of applicants for the award each year, the IDA Committee's policy has been to give priority to people who did not receive an award in the previous round.\*\***

- **The current round of awards covers activities taking place between July 2, 2019 through July 1, 2020.**
- **The deadline for the submission of this application is FRIDAY, JANUARY 31, 2020. Guidelines and application forms may be picked at the UUP Chapter Office (BSB room: 2-71P) and online <http://www.uuphost.org/downstatemedicalcenter>.**



# Individual Development Award

## Guidelines and Application Form

Activity Period: July 2, 2019 – July 1, 2020

### INSTRUCTIONS

**1. Mail applications to:**

**U.U.P.  
MSC Box 96**

**2. Deadline:**

**FRIDAY, JANUARY 31, 2020**

**All applications must be received in the UUP Office,  
Room BSB 2-71P, by - FRIDAY, JANUARY 31, 2020, 4:00 P.M.  
*The deadline is firm.***

1. **DO NOT** include original receipts with application. (You will need these later to redeem award.)
2. Remember to include some documentation of your activity, such as an announcement or brochure.
3. Remember to include a copy of your CV or resume with your application

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All IDA awards are reviewed and determined by an **8**-member committee, the Downstate Joint Labor Management Individual Development Award Committee.

This packet contains an abbreviated version of the statewide IDA guidelines. You will find the complete guidelines on to <http://nysuup.lmc.ny.gov/development/individual.html>. The website also contains a listing of frequently asked questions about the IDA.

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

**INDIVIDUAL DEVELOPMENT AWARD PROGRAM**

**GUIDELINES FOR PERIOD July 2, 2019 – July 1, 2020**

The Individual Development Award program is designed to support a variety of Individual development activities by employees in the UUP Bargaining Unit. The maximum amount that can be awarded to an applicant for an activity under this program is \$1,000, although due to the heavy demand for these funds, the Downstate Individual Award Committee has always set its maximum at considerably less. The exact amount varies from year to year depending on the availability of funds and the number of people who apply. Recipients of previous awards will be given a lower priority.

**Eligibility for Award**

The State of New York/United University Professions Joint Labor-Management Committees Individual Development Award Program is intended to assist eligible SUNY employees in developing their full individual potential and in preparing for advancement.

Both full-time and part-time employees in the UUP Bargaining Unit are eligible for an award. Applicants must be in the bargaining unit at the time of the award and during the dates of the proposed activity.

**Examples of Projects or Activities**

Only one application will be accepted and only one project or activity may be funded during an award period. Projects or activities must fall within the following categories:

- Basic, applied or historical research.
- Curriculum or instructional material development.
- Workshop, seminar, internship or course work not covered by Contract Article 49 or SUNY tuition assistance.
- Conference participation or attendance.
- Preparation of material for publication.
- Grant proposal development.
- Individual reading or independent study.
- Other work-related Individual development projects or activities.

## **Types of Support**

- Registration fees for conference or workshop.
- Consumable supplies (paper, pens, postage, etc.).
- Travel and related expenses (includes lodging and meals).
- Research support (e.g., computer time, network access or support, clerical support).
- Tuition and course related supplies. The maximum allowance for tuition is the SUNY rate at time of application.
- All funding requests must conform with the State Comptroller's Rules and Regulations and limitations contained therein. Specific questions about travel and other items should be addressed to your Campus Fiscal Office. Additional justification for specific items may be requested.

***Please note that since software, books and other non-consumable supplies purchased funds must remain the property of the State of New York/State University of New York. These items will not be considered for reimbursement.***

## **Application Procedure**

Each Campus Individual Development Award Committee will set their campus deadline for the award period. Along with the completed application, the applicant must submit the following information:

- An updated brief curriculum vita.
- A list of any other grant support for project or activity.
- An endorsement for any leave from the Campus President or Designee.
- A brochure, announcement or other relevant material describing the program and costs. If material is not yet available, please send information as soon as possible.
- Any other supporting documentation.

**NOTE: It is the applicant's responsibility to gather and forward this information to the Campus Individual Development Award Committee with the application before the deadline.**

## **Reimbursement Procedures**

Reimbursement of actual expenditures will be handled through the Campus Fiscal Office in accordance with the State Comptrollers Rules and Regulations and limitations contained therein. Questions regarding rates of reimbursement should be directed to that office. New York State vouchers with accompanying *original receipts* must be submitted to the Campus Fiscal Office by the recipient within thirty (30) days after completing the project or activity; or within thirty (30) days of receiving award notification, if the funded project or activity has already been completed. Vouchers and receipts not submitted in a timely manner will result in forfeiture of entitlement to reimbursement.

**State of New York/United University Professions  
Joint Labor-Management Committees**  
**INDIVIDUAL DEVELOPMENT AWARD PROGRAM APPLICATION**  
**FOR PERIOD**  
**July 2, 2019 - July 1, 2020**  
**SUNY Downstate Medical Center**

**Background Information**

NOTE: Type or print neatly. Attach additional sheets to complete questions fully.

1. Name \_\_\_\_\_ Date \_\_\_\_\_
2. Department \_\_\_\_\_ Box# \_\_\_\_\_  
Phone (W) \_\_\_\_\_ Phone (H) \_\_\_\_\_
3. E-mail Address \_\_\_\_\_
4. Title and/or Rank \_\_\_\_\_
5. UUP Bargaining Unit (08) Member Yes \_\_\_\_\_ No \_\_\_\_\_
6. Check both appropriate categories:
  - a. Academic \_\_\_\_\_ Professional \_\_\_\_\_ Librarian \_\_\_\_\_
  - b. Full Time \_\_\_\_\_ Part Time \_\_\_\_\_
7. Project or activity category (check one):  
Research \_\_\_\_\_  
Curriculum or Instructional Material Development \_\_\_\_\_  
Workshop, Seminar, Internship or Course Work \_\_\_\_\_  
Conference Participation (e.g., presenting, presiding, convening) \_\_\_\_\_  
Conference Attendance (attending without a formal role) \_\_\_\_\_  
Other (explain briefly) \_\_\_\_\_

## Proposed Project or Activity

**As concisely and clearly as possible, on a separate page:**

1. Describe your project or activity.
2. Specify the starting and ending dates of this project or activity.
3. Explain where this project or activity will take place.
4. If participating in or attending a conference, seminar, or workshop, attach any descriptive material and answer the following:
  - a. What is the title of this event?
  - b. Who is the sponsor?
  - c. If performing an official or specific responsibility for the sponsor of the event, please explain.
  - d. If presenting a paper or poster, or if formally participating in another role, give the following information:
    1. The title of the paper or poster.
    2. The nature of any other presentation.
    3. Whether or not the sponsor has accepted your paper, poster, or other proposal.  
If yes, please include letter or brochure. If acceptance is pending, notify the campus Individual Development Award Committee as soon as possible.
5. Briefly describe how this project or activity will directly and specifically affect your work responsibilities.
6. Explain how this project or activity will further your Individual development or otherwise assist in preparing for advancement.
7. Attach any other material that would be helpful to your campus Individual Development Award Committee in fully understanding and evaluating the nature of your project or activity.
8. Attach an updated and brief curriculum vita.

## Budget Summary

\$ \_\_\_\_\_ Tuition for course work or internship (at SUNY maximum rates)

\$ \_\_\_\_\_ Registration fees for conference, seminar, internship or workshop

\$ \_\_\_\_\_ Consumable supplies (paper, pens, postage, etc.)

\$ \_\_\_\_\_ Travel and related expenses (in accordance with NYS Comptroller's rules and regulations)

\$ \_\_\_\_\_ Research support (e.g., computer time, network access or support, or clerical support)

\$ \_\_\_\_\_ Other expenses (with justification)

\$ \_\_\_\_\_ **Total Cost for This Project or Activity**

\$(- \_\_\_\_\_) Less other Sources of Funding for Project or Activity

\$ \_\_\_\_\_ **TOTAL REQUESTED FROM INDIVIDUAL DEVELOPMENT COMMITTEE**

### **INDIVIDUAL DEVELOPMENT AWARD PROGRAM**

***NOTE: The maximum individual award under this program is \$1,000.***

I certify that all the above information is accurate and includes ***all sources of funding*** for this project/ activity. I am not requesting reimbursement for items that are being covered by S.U.N.Y. tuition waivers or other funding sources.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

For further information or assistance, please contact the UUP Chapter Office or follow this link <http://nysuup.lmc.ny.gov/development/individual.html>.

**The State of New York/ Individual Development Committee does not discriminate on the basis of race, color, national origin, gender, religion, age, disability or sexual orientation in the admission to, access to, or employment in its program activities. Reasonable accommodation will be provided on request.**