## 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.

	•••
Name	Title/Rank
	Work Phone
Divisio	n/Program/Department
Campı	us
Work A	Address
	sional Academic Full-time Part-time
Section	on B: Proposal Information
Date o	f proposed project or activity: From To
A.	Project or Activity Title
B.	Briefly describe the proposed project or activity and its job relatedness in 250 words or fewer.

**Section A: Application Information** 

## **Section C: Budget Summary**

Trip A

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.

Event Name:		Event Fee:
Dates		Location
Lodging Amt/Day		
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		

Other Sources

Campus Contribution

NYS/UUP JLMC

Trip C				
Event Name:		Event Fee:		
Dates	<del></del>	Location		
	No. of Days	TOTAL	<del></del>	
Meals Amt/Day	No. of Days	TOTAL		
Transportation Mode		TOTAL	<del> </del>	
Amount Requested From				
Campus Contribution	Other Sources _		NYS/UUP JLMC	
Tuition (at SUNY rate)				
Institution:	Number of Credit	ts:	<del> </del>	
Fee Amount:				
Amount Requested From				
Campus Contribution	Other Sources		NYS/UUP JLMC	
_	ferences, seminars, worksho	-		
Name of Event:Amount Requested From	ге	e Amount		
Campus Contribution	Other Sources _		NYS/UUP JLMC	
Campus Continbution	Other Sources _	<del></del>	NTS/OUF JEWC	
Replacement Salary (Exc	cluding fringe) etc.			
Name of Institution:	Fe	e Amount:		
Amount Requested From				
Campus Contribution	Other Sources _		NYS/UUP JLMC	
	and include justification below			
Type of Expense:	Tot	tai Cost:	·····	
Amount Requested From	<b>6 6</b>		NN/0// III	
Campus Contribution	Other Sources		NYS/UUP JI MC	

C. 1. Justification for Other Expenses					
C. 1. Identify Other Sources					
Section C. 2: 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:					
Fees for consumable artistic or resear	rch materials (e.g., reagents, antibodies, dyes, art supplies,				
sheet music) (include justification bel	ow)				
A. Type of Consumable:	Number of Items:				
B. Cost Per Item	Total				
Type of Consumable:	Number of Items:				
Cost Per Item					
	onsumable artistic or research materials are not available through				
	cannot be purchased using other grant or research funding				
Amount Requested From					
•	Other Sources NYS/UUP JLMC				
Encoderation of the control of the control of					
	l equipment or skills (e.g., sound mixing/engineering, recording				
	fees, performance space rentals, real time PCR testing, RNA				
sequencing) (include justification below)					

Type of Equipment/Services: \_\_\_\_\_ Cost: \_\_\_\_\_

Initial here to affirm	n that these facilities and services ar	e not available through your college or
university, and that they ca	nnot be purchased using other gran	t or research funding.
Amount Requested From		
Campus Contribution	Other Sources	NYS/UUP JLMC
Costs associated with pu	ublication (e.g., copyright or licensu	re fees, journal page charges, and stipends
or fees for indexers, proof	reading, translations). (Include justifi	cation below)
Type of Service/Item:		_ Cost:
Initial here to affirm	n that these services or items cannot	t be purchased using other grant or research
funding.		
Amount Requested From		
Campus Contribution	Other Sources	NYS/UUP JLMC
Other Expenses: (Include	justification below)	
Description:		Cost:
Amount Requested From		
Campus Contribution	Other Sources	NYS/UUP JLMC
Expense Totals		
Campus Total	Other Source Total	NYS/UUP JLMC Total

## C. 2. Identify Other Sources

**Justification Section C. 2.** 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)

## **Acknowledgement 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.1 and for C.2., Department, Program, Unit Head Signature is required for C.2		
Applicants Signature	Date	
Department/Program/Unit Dead Signature	 Date	

#### **Section 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

#### **Section 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.