**Teaching Enhancement Grant**

**Proposal Cover Sheet**

1. APPLICANT NAME:

2. CAMPUS PHONE:

3. BUDGETARY UNIT:

4. TITLE OF PROJECT:

5. If I receive the funds I am requesting through this professional development program, I agree to:

1. Work with CATL to design a presentation, workshops, blog post, etc., where I will disseminate what I learned to a broader audience by the date indicated in my award letter.
2. Send the IDC a short reflection that discusses how I worked to achieve the goals of the project by the date indicated in my award letter.
3. Share any documentation that I used when sharing my knowledge with my colleagues (e.g. handouts, worksheets, presentations, posters, etc.)

If I do not disseminate what I learned to a broader audience, if a reflection is not submitted, or I do not carry out the activities stipulated in the project proposal, I understand that I will not be eligible for any funding from the Instructional Development Council for a five-year period. I also understand that if awarded funding my proposal is open to review upon request made to the CATL or the IDC.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. I have read the proposal, approve its implementation, and certify that the goals stipulated are consistent with the unit’s program development plan and are likely to contribute to the improvement of student learning.

Budgetary Unit Chair Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FOR CATL/IDC USE ONLY

Date of Action: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Action: (1) Accepted (2) Tabled (3) Not Accepted