WESTERN NEVADA COLLEGE
COLLEGE STAFF DEVELOPMENT

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˜‡•– Name ã

Please do not use acronyms, but list the full name

˜‡•– Location ã

˜‡•– Dates ã

A date is needed.   Please do not use any form of TBA or TBD.

•‘—•–   ‡“—‡•–‹•‰ ã

For administrative use only

Revised 06 23

WESTERN NEVADA COLLEGE
COLLEGE STAFF DEVELOPMENT FUND
Application

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Name: _____   Telephone: _____

Email: _____   Department: _____

Submission Deadline – Apply early. pplications for College Staff Development funding should be submitted as soon as possible, but at least one month prior to travel. Plan accordingly. —„• completed application with all conference and financial information attached to

WESTERN NEVADA COLLEGE
COLLEGE STAFF DEVELOPMENT FUND

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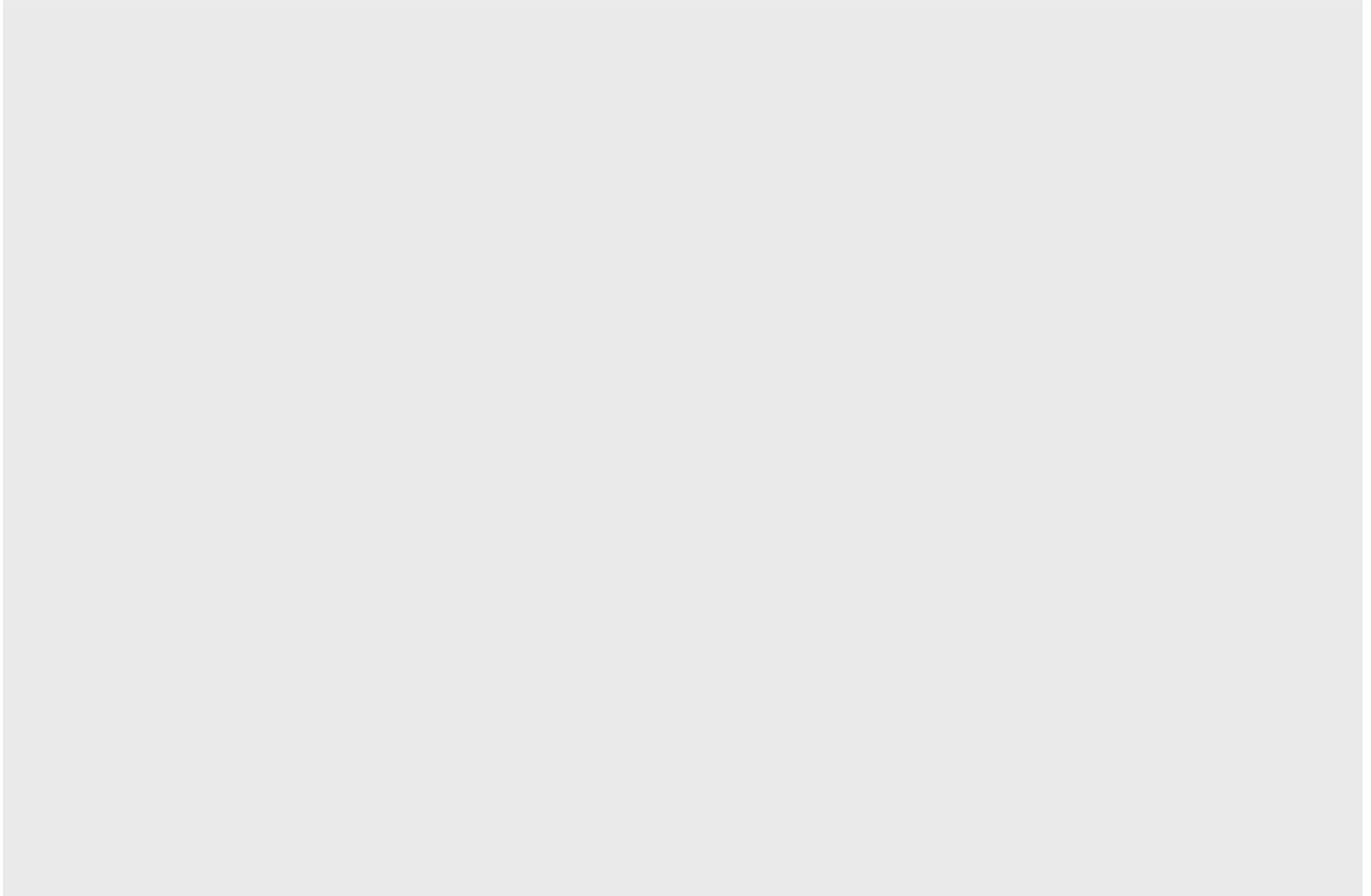
Full time Academic Faculty

Part time Academic Faculty

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Full time Administrative
Faculty

.53 or more

COLLEGE STAFF DEVELOPMENT FUND

Project Report

Instructions: Ž‡ ƒ complete –Š ˆ‡ ŽŽ '™‹••ˆ‰ˆ%" • ƒ – ƒ••†•—„•←Š"‡ ' ' " – '–Š $D '••‹––‡‡ Chair (heather.rikalo@wnc.edu) with 30 days of completion of funded •€Â #