Please visit the PASC website to determine which deadline is appropriate for your application.   
Application does not guarantee funding to the applicant.

**Employee Name: Bear Number:**

**Staff Position & Unit:**

**Professional Development Expense Type** *(check box):* **Total Amount Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* + *Conference registration*
  + *Webinar registration*
  + *Certificate training cost*
  + *Professional exam preparation course fee*
  + *Professional exam sitting fee*
  + *Professional membership dues*

\*\* Attach supporting documentation for the professional development opportunity (e.g.: webpage; pamphlet) \*\*

|  |
| --- |
| **In the space provided, describe how this professional development opportunity positively impacts UNC:** |
|  |

Select preferred payment mechanism if funded *(check box):*

* Personal reimbursement (expense incurred personally by applicant; UNC reimburses applicant directly)
* Budget transfer to staff’s UNC unit (funds transferred to applicant’s unit; expense charged to a UNC PCard)

**Employee Signature Date / /**

***Supervisor Endorsement:* I support this applicant’s participation in the proposed professional development opportunity and affirm the anticipated positive impact to UNC.**

**Supervisor’s Signature Date / /**

***SUBMIT COMPLETED APPLICATION TO:*** [***PASC@UNCO.EDU***](mailto:PASC@UNCO.EDU)