



GEAR UP “Believe & Achieve”

PROFESSIONAL DEVELOPMENT

Financial Assistance Application

1. Date Requested: _____
2. Reimbursement: (Circle one)
 - a. School
 - b. Individual
 - c. Other: _____
3. Applicant Name: _____
 - a. Phone Number: _____
 - b. Email: _____
4. School Name and District: _____
5. Conference/Training presented by:
 - Location: _____
 - Address: _____
 - Website Link: _____
6. Grade Level you are currently teaching: _____
7. Number of students you may serve and/or impact: _____
8. Please check the GEAR UP objective that this Conference/Training applies to:
 - To increase the academic performance and preparation for postsecondary education of GEAR UP students.
 - To increase the rate of high school graduation and enrollment in postsecondary education for GEAR UP students.
 - To increase GEAR UP students’ and their families’ knowledge of postsecondary education options, preparation and financing.
 - Other (please give details).

(if more room is needed, please write on the back of this form under “Notes”).

9. Provide a list of the course you plan to attend with a brief description of the training:

(continue on back)

10. Are you being funded by another organization?

- School District
- Non-Profit, if so, who? _____
- Personal
- Other, _____

11. **Reimbursement is required to be fully documented.** Individuals requesting reimbursement will be required to register with Seminole State College as a “vendor” and provide all receipts and invoices for your reimbursement. travel during the event and/or mileage for automobile travel to comply with Seminole State College Travel Reimbursement Procedures. Procedures will be provided to you if your request is approved.

Registration/Training cost requesting: \$ _____

Estimated Travel Cost (milage, airfare): \$ _____

Total Requesting for reimbursement: \$ _____

Applicant Name (please print)

Applicant Signature

School Administrator (name/title)

Date

FR OFFICE USE: Approval/Supported by:

GEAR UP Director

Date

GEAR UP Professional Development Coordinator

Date

****RETURN/Email to: Marlene M. Webster, PD & Family Engagement Coordinator**

Phone:405-382-9684

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