## SOUTHERN STATE EDUCATION ASSOCIATION

via

## **Faculty Senate Professional Development Committee**

## **Petition for Professional Development Opportunity Approval**

Name:		
Proposed	Opportunity:	
<b>Duration</b>	of Opportunity:	Stipend if completed \$
Describe t	the relationship between the opportunity listed	l above and your professional development.
How will tl	he opportunity improve your teaching and/or scho	plarship?
Employee Signature:		Date:
Submit this	is form to the Professional Development Comm to CAO.	nittee for review, recommendation, and
TO BE CO	MPLETED BY FACULTY SENATE PROFESSIONAL	DEVELOPMENT COMMITTEE:
Recommended by Committee:		Date:
SUBMIT C	COMPLETED FORM TO THE CAO FOR APPROVAL	
☐ Appr	roved	······································
☐ Denie	ed for the following reason(s):	
CAO:		Date: