# SAN DIEGO MIRAMAR COLLEGE Travel and Professional Development Proposal Form

### **Request for Funds**

- If requesting travel funds attach all **supporting documents** (Conference Itinerary, Hotel, Registration Fee, Airfare, & Mileage Map).
- Professional Development budget requests are due to the committee at least one week prior to their next PDC Meeting for consideration. (See published meeting schedule.) You will be notified by the PDC Co-Chairs of the committee's decision. NOTE: There is a \$1000 maximum/applicant/year.
- Once approved, create a TA in PeopleSoft. Scan and attach this approved form and all support douments along with your TA.

The approved, events						
SECTION 1: Is Funding S	ource from outs	ide the PD Com	nmittee?	Yes N	lo Source:	
First Name: Last Nar		ime:		Empl. ID:		Today's Date:
Position Title:			Telephone:			
Email Address			Substitute Needed		Yes No	
Organizational Sponsor:	_		Member of Organization		Yes No	
SECTION 2: Select Appro	priate Request A	Avenue				
Title of Proposed Activity						
Travel/Conference	Event	Pr	Project		Presentation	Other
SECTION 3: to be comple	ted for Travel/C	onference exp	enses only			
				aa City and i	State	
Travel Inclusive dates:	From: To Conference Name, City and State:					
REMEMBER: You need to attach all Supporting Documents to this form	Detailed Expense Items					\$ Amount
	Mileage: From Total Round Trip Miles					0.545 x RT Miles
	Miramar College	ege (rounded to nearest whole number)				\$
	Registration Fee	tion Fee Pre-Pay (District) <i>Prepays require a</i> Employee Paid				
	Airfare	Pre-Pay (District) minimum of 4/wks Employee Paid Pre-Pay (District) processing time Employee Paid				
	Hotel/Lodging					
	Auto Rental					\$
	Miscellaneous	Estimated costs (taxi, shuttle, parking, luggage, gas for rental car, etc.)				al .
	iviiscellalleous					<sup>31</sup>   \$
	Internet	For college business				\$
	Max for meals					7
	NOT included at Conference*	Breakfast:	_	nch:	Dinner:	\$
		\$10.00 \$1		\$21.00		<b>T</b>
	* Meal reimbursement for travel within San Diego County is NOT permitted.					
	Total Funds Requested:					ed: \$
Total Amount	Funds Requested from Other Source (list helow):					
Requested from PDC:	\$	Tands requested from other source (fist below).				\$
Budget Numbers:	PD:	Dept	Product	Other	Fund Dept	Product
		APPROV	AL SIGNATUR	ES		
Dept. Chair/Supervisor Signature (below)		Date Dean/Mana		ger Signature (below)		Date
· •	- · · ·		,	<del></del>	•	
PD Committee Signature (below)		Date	Percent Fund	led	%	Total \$
Vice President's Signature (right)						Date

#### TRAVEL AUTHORIZATION MUST BE ENTERED IN PEOPLESOFT AND APPROVED PRIOR TO TRAVEL

You will receive a system-generated email notifying you once your travel has been approved.

## Complete this page for PDC approval only (200 word limit in each field)

<u>Overview</u> : Please provide a succinct description of your Proposal for Professional Development.					
<u>Goals</u> : Please describe how your involvement in this request would support the College Mission and/or the Strategic Goals of Miramar College.					
Outcomes and Deliverables: Please identify: a) the beneficial outcomes of this proposal; and b) the					
deliverables of how this could positively impact Miramar College and/or the District.					

#### San Diego Miramar College 2013 – 2020 Strategic Plan Goals

- I: Provide educational programs and services that are responsive to change and support student learning and success.
- II: Deliver educational programs and services in formats and at locations that meet student needs.
- III: Enhance the college experience for students and the community by providing student-centered programs, services and activities that celebrate diversity and sustainable practices.
- IV: Develop, strengthen and sustain beneficial partnerships with educational institutions, business and industry, and our community.