

Faculty Education and Development (FEAD) Grant

Application Form

Faculty members MUST review the *College of Art and Design's FEAD Program Guidelines* (located on https://inside.cad.rit.edu) **prior** to completing the application form. Please download and complete this application form using Adobe Acrobat.

Faculty Information				
Name	· · · · · · · · · · · · · · · · · · ·			
RIT Email				
Rank				
Academic Unit				
History of FEAD Grant Funding				
☐ This is my first FEAD Grant proposal.				
☐ I have received FEAD Grant funding in the past. Please list funding rece	ived within the last th	ree (3) years.		
Prior FEAD Grant Proposal Title	FEAD Grant Award Date	Final Report Submission Date		
Abstract: Clearly state the objective and desired outcome in 100 words or less.				

	Pro	iect Narrative:	Provide a detailed but	concise description of the	proposed project	(750 words or less)
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Anticipated Outco	omes: List of measurable outcomes (500 words or less).
Plan of Work Alig	nment: Describe how this project will contribute to your current plan of work (500 words or less).

Expenses cannot be incurred prior to the notification of a FEAD grant award. Select all the apply: **Professional Development:** Conference Seminar Workshop Exhibition Other _____ ☐ I will be presenting/speaking at the event ☐ I will only be attending the event for professional development Event title Destination Date(s) Travel: Follow travel policies summarized at: https://www.rit.edu/fa/controller/content/travel-policies-procedures-manual • Airfare: Use of a RIT designated agency is preferred. Car mileage or car rental • Conference registration: Use the School's Procurement Card and provide itemized receipts. Lodging Per diem meals • Hospitality: Provide a detailed rationale and list of attendees for reimbursement. Misc. (taxi, bus, subway, parking, etc.) Travel Budget Total Other Expenses: (reasonable supplies/equipment/course materials needed) Course development stipend Other Expenses Budget Total **Total Funding Requested** (add Travel Budget Total and Other Expenses Budget Total) Supplementary Funding Sources: I will be receiving the following additional funding from: CAD Professional development/scholarship allotment \$_____ Grant (provide name) Waived fees (list) Other

Timeline: List all major events, including the initiation, completion, and submission of the final report (500 words or less).			
Faculty Member's Signature			
Faculty Member's Digital Signature	Date		
The faculty member must email this PDF application to their School Director by Nove	mber 15th.		
INCOMPLETE OR LATE SUBMISSIONS WILL NOT BE ACCEPTED.			

* THIS SECTION TO BE COMPLETED BY THE SCHOOL DIRECTOR ONLY

School Director Support		
☐ I support this FEAD Grant proposal.	☐ I do not support this FEAD Grant prop	osal.
☐ This proposed project is tied to the facult in their Annual Self Appraisal.	y member's annual Plan of Work and will b	e detailed
Please provide a clear and concise rationale	for your support or lack of support (500 words	or less):
School Director's Signature		-
Faculty Member's Digital Signature		Date

The School Director must email this completed PDF to Beth Schoenfeld in the Dean's Office by **December 15th**.

INCOMPLETE OR LATE SUBMISSIONS WILL NOT BE ACCEPTED.