



LEADERSHIP ACADEMY | LEARNING TUESDAYS | MENTORING | LEADING PEOPLE RESPONSIBLY

## Research Foundation/SUNY Center for Professional Development Scholarship Application

Name \_\_\_\_\_ Email \_\_\_\_\_

Campus \_\_\_\_\_ Position \_\_\_\_\_

What training event(s) are you interested in applying/registering for?

What is the CPD Member Rate associated with the event(s)? \_\_\_\_\_

1. How long have you been affiliated with SUNY? Please describe the relationship.
2. Have you been awarded grants in the past? Please provide basic, high-level details of the work.
3. What kind of research do you wish to do in the future? Do you think this training opportunity will help you reach this goal?
4. Have you been granted an RF/SUNY Scholarship in the past? Please provide the details including the year and what the scholarship was used for?

### Recommendation by department chair, grant administrator or industry professional

(This should be someone who understands the work you do as it relates to research and recommends that the professional development course or program you want to pursue is a good fit.):

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Department Approval

(The department requirement is to ensure the normal approval process on the campus has been followed.)

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit your completed application to [Learning@rfsuny.org](mailto:Learning@rfsuny.org).