

Calenda

Library

Review the goals (/sites/rsf/files/RSF%20Prof.%20Dev.%20Fund%20Goals.pdf) before filling out the form

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College of Forestry

Research Support Faculty Committee

Professional Development Application Form

RESEARCH SUPPORT FACULTY* - PROFESSIONAL DEVELOPMENT FUND OSU College of Forestry

*Research Support Faculty eligible for these funds are non-tenure-track (NTT) fixed-term faculty, including the ranks: Faculty Research Assistants (FRA), Senior Faculty Research Assistant I (SFRA I), Senior Faculty Research Assistant II (SFRA II), Research Associates (RA)¹, and Professional Faculty engaged in research. Eligibility for Research Professional Faculty is restricted to those who work to support another faculty member's research program. Professional Faculty who lead their own

Research Associates (RA)¹, and Professional Faculty engaged in research. Eligibility for Research Professional Faculty is restricted to those who work to support another faculty member's research program. Professional Faculty who lead their owr research programs are ineligible.

¹Research Associates with the 'postdoc' marker in their PD are ineligible

Name * Faculty Rank * - Select -Department * Supervisor * Event Name * Event Date * Year ▼ Month ▼ Day ▼ Event Location * Describe your proposal in specific terms * (e.g., attend grant writing workshop, present research results at XXX conference) Describe the event or post a link to the event website * Describe the benefits of this activity to your professional development plan * Describe how your participation relates to one or more of the goals of the RSF professional development fund *

0/11/2016	Professional Development Application Form Research Support Faculty (
(e.g., if a goal is to learn an emerging t	echnology, include "Support CoF's ability to be at the forefront of new forestry research by promoting the (').
How long have you been emp	loyed as RSF in CoF *
<1 year	
1-4 years	
5-10 years10+ years	
When did you last attend a pro	ofessional development activity? *
<1 year	
1-2 years	
2-3 years>3 years	
When did you last receive an	award from this fund? *
<1 year	
1-2 years	
2-3 years	
>3 years N/A	
Provide a detailed budget for the	e proposed project. Include details on the following as they apply:
Registration *	
_odging *	
ransportation *	
Tunsportation	
liscellaneous (specify below)	*
Description of miscellaneous	expenses
/erify that your supervisor ha	s agreed to either: *
○ Pay salary○ Approve leave	
Fotal Budget *	
otal Budget	
Total amount requested *	
f the total budget exceeds the	e amount requested or the \$2000 maximum award, how will the remainder be funded?
e.g. my supervisor will pay, I will cove	or the remainder, or it will be covered by another OSU fund)
By clicking "submit" you are corporticipation at this event.	nfirming that you are CoF Research Support Faculty and that your supervisor supports your

 $http://rsf. for estry. or egon state. edu/professional-development-application-form \verb|#overlay-context=professional-development-application-form||$