

Old Dominion University

TEACHING ENHANCEMENT FUNDS COVER SHEET

Faculty Applicant:

Date:

Phone:

Email:

Department/School:

College:

Budget Request: \$

Title of Proposal:

Previous Faculty Development Awards Received:

Award:

\$

\$

\$

Comments:

Signature:

Date:

Department Endorsement

Endorsement of Chair:

Budgetary Commitment from Department: \$

Signature (Department Chair):

Date:

College Endorsement

Endorsement of Dean:

Budgetary Commitment from College: \$

Signature (Dean):

Date:

Faculty Status and Remuneration Committee's Recommendation

Recommended:

Award: \$

Not-Recommended:

Signature (Chair, Faculty Senate Committee G):

Date:

Executive Vice-President's Approval

Approved:

Award: \$

Disapproved:

Signature (Executive Vice-President):

PROPOSAL

Description of Activity (Must include the goals of the project/activity, relationship to department, school or college curricular plans, how the project will contribute to the knowledge and professional growth of the applicant(s) leading to improved instruction, and the plan for evaluation of the effort):

Timetable (Must include work to be accomplished (including clearly defined additional work supported by a stipend), notice and schedule for workshops, workshop brochure, potential visitation dates for speakers, etc):

Budget (Must specifically detail all expenses (e.g., materials, production costs, expenses for workshops or speakers, stipend if being requested, etc.). For projects involving technology, please consult Technology Services (IT) to determine cost estimates and IT's ability to support the plan):

Summary (Must describe the faculty member's teaching role in the academic unit and strategies already implemented to improve instruction):