



UVM Staff United

Professional Development Fund

Information & Application

Description

Per [Article 38 of UVMSU CBA](#), the UVM Staff United Professional Development Fund (UVMSU PDF) was created for the purposes of supporting UVM Staff United bargaining unit employees seeking to participate in training, conferences, or other professional development opportunities. UVMSU aims to support employees in their career growth and in service in their professional fields.

Eligibility

You must be part of the UVM Staff United bargaining unit at UVM to apply. Please plan on a minimum of 15 business days for UVMSU to process this request - the sooner you apply before an opportunity, the more likely you are to secure the funding in time.

Application Process

1. Determine you are eligible by being a UVMSU bargaining unit employee.
2. Complete the **EMPLOYEE** section of the application.
3. Have your supervisor complete the **FOR APPLICANT'S SUPERVISOR** section of the application. This includes a required signature from your supervisor confirming approval for you to:
 - a. Apply for UVMSU PDF funds
 - b. Take release time required to attend the activity with the understanding that release time requires the activity to be relevant to your job duties
4. Submit your application to profdevfund@uvmstaffunited.org.
5. The Professional Development Fund Committee (composed of 3 Union representatives and 3 UVM administrative representatives) will review your request within 15 business days.
6. If awarded money, you will receive an award letter via email that will include instructions regarding the distribution of funds, the proper use of funds, and what to do with excess or unused funds. This will include information about keeping your receipts so any excess funds make it back to the UVMSU Professional Development Fund for your colleagues rather than being absorbed into department accounts.

Note for Opportunities Requiring Travel

You must follow UVM policies regarding travel authorization and expense reimbursement if your activity requires travel: <https://www.uvm.edu/sites/default/files/UVM-Policies/policies/travel.pdf>.

We recommend reviewing requirements as you estimate your expenses. (Example: Meal reimbursements max at \$60 per day. Fuel for personal car versus rental car differs.)

UVM Staff United Professional Development Fund Application

EMPLOYEE

Name: _____

Date: _____

Email: _____

Phone: _____

Department/College/Unit: _____

Department Business Manager: _____

Job Title/Standard: _____

Working Title (if different): _____

1. Name of opportunity for which you are requesting funds:

2. Anticipated dates of opportunity: _____

3. Please list all anticipated expenses and **include the total amount:**

| Item | Amount | Description |
|---------------------------|--------|-------------|
| Airfare/Bus/Train Tickets | | |
| Driving (mileage, gas) | | |
| Meals | | |
| Fees | | |
| Other | | |
| Other | | |
| TOTAL: | | |

4. Please list **all** anticipated **sources of funding** for this opportunity, and amounts (besides the amount you are asking for from the UVMSU Professional Development Fund)

| Funding/Source | Amount | Notes |
|-----------------|--------|-------|
| Department/Unit | | |

| | | |
|--|--|--|
| External grant funds reserved for professional development | | |
| Self | | |
| Other | | |

5. Total Amount requested of UVMSU Professional Development Fund: _____

6. Please provide a brief description of the opportunity.

7. Please describe the benefits that you, your department, and/or the campus will derive from your participation in this opportunity. **Include how the opportunity relates to your current job duties.**

8. In the spirit of continuing to support professional development accessibility to UVMSU employees, please describe any barriers you have encountered in accessing internal or external professional development opportunities in the past (if applicable).

9. Is there anything else you would like the Professional Development Fund Committee to know?

Applicant Signature _____ **Date** _____

FOR THE APPLICANT'S SUPERVISOR

Per [Article 38 of UVMSU CBA](#), Supervisor approval is required for applicants seeking funds from UVM Staff United's Professional Development Fund.

Important items of note for supervisors per Article 38:

- Staff are encouraged to pursue professional development funds and opportunities through their units where available. In doing so, they should follow any unit-specific established procedures for requesting professional development funds and opportunities. Staff who receive professional development funds through their units are not precluded from applying for the funds described in this Article.

With the approval of their supervisor, employees may make a request to the [UVMSU Professional Development Fund Committee] PDFC for professional development funds through the established process. Your written approval signifies that this professional development opportunity is relevant to the requesting employee's job duties.

- Employees who request and receive funds through the PDFC are not precluded from receiving additional professional development funds through their department or other sources.
- **Professional and Educational Development:** Employees seeking short-term time off or flexibility with their schedules to take classes at UVM or another educational institution shall make a request in writing to their supervisor, who shall review and approve or deny requests based on the business needs of the department. Decisions shall not be unreasonably denied. Business need may be a factor in determining whether or not a denial was unreasonable.

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1. Will the department/unit be providing any funding for this opportunity? If so, please confirm the amount here. (Note: your answer here will not affect the employee's eligibility to receive money from this fund.) _____
 2. By providing your signature, you are confirming that:
 - a. The individual has received your approval to apply for UVMSU PDF funds.
 - b. The individual has received your approval to take release time required to attend the activity.

Supervisor Name _____

Supervisor Signature _____ Date _____