

Student Professional Development Fund Financial Support Application

(Return completed Application to the Office of Career and Professional
Development or e-mail to llamb@law.stetson.edu)

STUDENT INFORMATION

Name:	_____	Student ID #:	800 1L / 2L / 3L / 4L / LLM
Email Address:	_____	Classification (circle both):	FT / PT
Phone Number:	_____	Anticipated Graduation Date:	_____

REQUEST DETAILS

Complete this form with as much detail as possible and submit it to the Office of Career and Professional Development by the announced deadline. Please attach additional sheets if necessary. Incomplete applications might not be considered for funding.

Name of Requested Event:

Location of Requested Event:

Date of Requested Event:

Why do you want to attend this particular event?

What role, if any, will you play at the event?

What is your goal in attending this event? What do you hope to achieve or accomplish?

Additional information you would like to include in support of your request:

Financial Needs

Please give as accurate an estimate as possible of all relevant expenses requested. Thorough research of related costs accurate as of the date of submission of this application is required. Incomplete documentation can delay consideration of a funding request. The request for financial support should be limited to the specific need. Detailed supporting documentation should be attached once you have attended the event. Refer to the College of Law’s policies and procedures on travel for additional guidance.

In what ways are you able to off-set the total expenses of attendance?

Elements of Event Participation	Estimated Cost of Element
Event Fees (or related registration/program expenses)	
Travel Expenses (driving reimbursed at \$.445 per mile, flight, etc)	
Accommodations (price of hotel or other lodging)	
Subtotal of Costs of Event:	
Subtract other sources of funding (scholarship, waiver of fees, etc)	
Total Amount Needed for Event:	

**I AFFIRM THAT THE INFORMATION CONTAINED HEREIN IS TRUE, CORRECT,
AND COMPLETE, TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

Signature: _____

Date Application submitted: _____

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Comments: