

**WHITMAN HIGH SCHOOL EDUCATION FOUNDATION  
PROFESSIONAL DEVELOPMENT APPLICATION**

Name \_\_\_\_\_ Date \_\_\_\_\_

Position at Whitman & Department \_\_\_\_\_

Email Address (to be notified of grant status) \_\_\_\_\_

Activity

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How will attendance at this activity enhance you professionally?

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Location and Date of Conference / Program \_\_\_\_\_

Date Needed \_\_\_\_\_ Length of Conference / Travel \_\_\_\_\_

Estimated Expenses: \_\_\_\_\_ (please note the maximum per diem for expenses is \$100)

Registration Fee \_\_\_\_\_ (please link or attach supporting documentation concerning amount of fee)

Transportation \_\_\_\_\_ (if required please estimate if necessary)

Food & Lodging \_\_\_\_\_ (if more than 1 day please estimate if necessary)

Applicant's Signature/ Date

I agree to provide a completed Statement of Expenses, and accompanying receipts, within (60) days of completion of the program. (Maximum Grant is \$750)

Principal's Signature / Date \_\_\_\_\_

Resource Teacher Signature / Date \_\_\_\_\_

Panel Recommendation / Date \_\_\_\_\_

Amount Granted \_\_\_\_\_

*Please return completed form via email to:  
[whitmaneducationfoundation@gmail.com](mailto:whitmaneducationfoundation@gmail.com)*

**WHITMAN HIGH SCHOOL EDUCATION FOUNDATION  
PROFESSIONAL DEVELOPMENT APPLICATION**

**STATEMENT OF EXPENSES**

If your application is approved, you must submit a copy of this form, along with receipts or other documentation of your expenses, within (60) days following completion of the program.

Your Name: \_\_\_\_\_

Title of Program: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Location: \_\_\_\_\_

Registration Fee: \_\_\_\_\_

Materials  
(describe): \_\_\_\_\_

Transportation: \_\_\_\_\_

Lodging: \_\_\_\_\_

Other (describe): \_\_\_\_\_

\_\_\_\_\_

TOTAL: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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[whitmaneducationfoundation@gmail.com](mailto:whitmaneducationfoundation@gmail.com)*