# Perkins/Strong Workforce Program Professional Development Funds

2020-2021

CCSF’s Perkins CTEA program and the Strong Workforce Program maintain funds for the professional development of individual career education (CE) faculty. Faculty applying for these funds must be in need of training that, if completed, will clearly improve your CE program.

We strongly encourage you to pursue professional development opportunities meeting Perkins Required Use(s) of Funds (listed on page 2) and request that you identify Perkins Use(s) of Funds in your application.

## Application Process

1. Complete the **Perkins/SWP Professional Development Funds Application** to determine your eligibility for receipt of Perkins or Strong Workforce Program professional development funds.
2. Complete the **Requisition and Travel Order Form**
3. **Be sure to secure all of the following signatures on the Perkins/SWP Professional Development Funds Application and the Requisition and Travel Order Form or they will be returned to you:**
   1. Your signature
   2. Your Department Chair’s signature
   3. Your Dean’s signature
4. Submit your Perkins/SWP Professional Development Funds Application and Requisition and Travel Order Form **at least 30 days in advance of activity start date (for in-state activities) and 60 days in advance of activity start date (for out-of-state activities)** . **Funds may not be available after April 1, 2021** and all **activities must be completed by June 30, 2021.** Please note this deadline when submitting requests for Spring or June activities.
5. Mail OR email forms to: Cece Jones

(Perkins) Mailbox: C-30

[cjones@ccsf.edu](mailto:Cjones@ccsf.edu)

You will receive a response to your request from the Perkins and/or SWP office **within 72 hours.** Note that you may be partially awarded by both programs to meet your funding request.

## Reimbursements

**Please keep ORIGINAL, ITEMIZED RECEIPTS (the itemized receipt shows the individual cost for each item purchased and has separate line items for tax and total cost. Submission of the signature receipt will impact your reimbursement) for all funded expenses incurred during your activity.** Following the completion of your professional development activities, you must submit a completed **Expense Report Form** with all supporting documentation to the Perkins and/or SWP staff who notified you of your award.

*For additional information about Professional Development funding through Perkins and SWP, please contact John Halpin (Perkins) at 415-452-7013 -* [*jhalpin@ccsf.edu*](mailto:jhalpin@ccsf.edu) *with questions.*

1. Strengthen the academic and career and technical skills of students participating in career education programs, by strengthening the academic and career education components of such programs through the integration of academics with career education programs through a coherent sequence of courses, such as career and technical programs of study
2. Link career education at the secondary level and career education at the postsecondary level, including by offering the relevant elements of not less than one career and technical program of study
3. Provide students with strong experience in and understanding of all aspects of an industry, which may include work-based learning experiences
   * Develop, improve, or expand the use of technology in career education.
4. Provide professional development programs that are consistent with secondary and postsecondary teachers, faculty, administrators, and career guidance and academic counselors who are involved in integrated career education programs, including:
   * Effective integration and use of challenging academic and career education provided jointly with academic teachers to the extent practicable;
   * Effective teaching skills based on research that includes promising practices;
   * Effective practices to improve parental and community involvement; and
   * Effective use of scientifically based research and data to improve instruction;
5. Support of education programs for teachers of career education in public schools and other public school personnel who are involved in the direct delivery of educational services to career education students, to ensure that such teachers and personnel stay current with all aspects of an industry;
   * Internship programs that provide relevant business experience; and
   * Programs designed to train teachers specifically in the effective use and application of technology to improve instruction
6. Develop and implement evaluations of the career education programs carried out with funds under this title, including an assessment of how the needs of special populations are being met
7. Initiate, improve, expand, and modernize quality career education programs, including relevant technology
8. Provide services and activities that are of sufficient size, scope, and quality to be effective
9. Provide activities to prepare special populations, including single parents and displaced homemakers who are enrolled in career and technical education programs, for high skill, high wage, or high demand occupations that will lead to self-sufficiency.

# Perkins/SWP Professional Development Funding Application 2020-2021

Name: Employee ID (not SSN):

Department: Position:

Phone: Fax:

Mailbox: Email:

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| --- | --- | --- | --- | --- | --- |
| Are you in a program that received 2018-19 or 2019-20 Perkins funds? | \_ |  | \_Yes |  | No |
| Are you in a program that received 2018-19 or 2019-20 SWP funds? | \_ |  | \_Yes |  | \_ No |
| *Ask your Department Chair if you are unsure if your program received funding*  **Include brochures, agendas, and other materials when available.** |  |  |  |  |  |

Professional Development Event Title:

Event Website URL:

Event Location (City/State):

Travel Start (Date): Travel End (Date):

Reason for Attending:

1. What are the specific professional development activities and what content will be covered?
2. What are the expected learning outcomes for participants and/or what is the expected impact on your 2020-2021 Perkins project or career education program?
3. Which Perkins Require Use(s) of Funds does this activity meet (refer to page xx)? *E.g. #7, 8, 9:*
4. What other sources of funding have you identified to support your participation in this activity? Include the source, amount received, and activity being supported (e.g. AEBG, $500, hotel for two nights).

## Expenses

Estimate your expenses for this activity, including transportation, parking, registration fees, meals, incidentals, etc. For estimates of meals, lodging, transportation (airfare rates, mileage rate for privately owned vehicles, etc.) visit [www.gsa.gov.](http://www.gsa.gov/) Expenses must reflect the most cost effective and prudent use of state/federal funds.

|  |  |  |
| --- | --- | --- |
| **Description** | | **Estimated Cost** |
| **Airfare** | economy/coach or lesser fare |  |
| **Private Auto** | miles at $0.575/mile |  |
| **Taxi/Rideshare** | estimated # rides |  |
| **Public/Other Transit** | |  |
| **Meals (only for meals not included with activity)**  **# Meals** Breakfast (#) Lunch (#) Dinner (#)  **Allowance** ($) ($) ($)  Use the [U.S. General Services Administration website](http://www.gsa.gov/) (per diem) to determine allowance for your location, then estimate your total meals cost. | |  |
| **Lodging** | # of nights $/night allowable hotel taxes/fees |  |
| **Registration Fees** | do not include membership fees |  |
| **Other Expenses (describe):** | |  |
| **Total** | |  |

**Applicant Statement: I will submit my completed Requisition and Travel Order Form with this application. I will submit my Expense Report Form and all supplemental documentation to Perkins and/or SWP staff (as directed in award correspondence) within 10 working days after travel is completed for this event.**

Applicant Signature: Date:

Department Chair Signature: Date:

Dean Signature: Date:

## Approvals Only – do not complete below

Perkins Administrator: Date: Amount:

SWP Administrator: Date: Amount: