



Professional Development  
 People and Culture  
 GPO Box 2100  
 Adelaide SA 5001  
 E: [professional.development@flinders.edu.au](mailto:professional.development@flinders.edu.au)  
 CRICOS Provider No. 00114A

Office Use Only

Received:	
HPRM Ref:	
Applicant advised	

**PROFESSIONAL STAFF  
 DEVELOPMENT FUND**  
**Application for support from the  
 Professional Staff Development Fund**

Applications are invited from employees who are eligible to apply for support from the Professional Staff Development Fund. Applicants should read the [Professional Staff Development Fund website](#) in full before completing this form.

**1. APPLICANT DETAILS**

<b>Family Name:</b>		<b>Telephone:</b>	
<b>Given Names:</b>			
<b>Email:</b>			
<b>College/Portfolio and Division:</b>			
<b>Position Title and Classification:</b>			
<b>Eligibility to apply:</b> I am a professional staff member with 6 months or more continuous service with the University (not including casual service):	Yes	No	
<b>Supervisor's Name:</b>			
<b>Have you previously received funds from the Professional Staff Development Fund?</b>	Yes	No	
<b>If yes, in which year was this received?</b>			

**2. PROFESSIONAL DEVELOPMENT PROPOSAL– PLEASE ATTACH ACTIVITY BROCHURE /FLYER /OUTLINE**

**2.1** Please describe the professional development activity that you propose to undertake and how this is relevant to your career development at Flinders University, including expected outcomes.

**2.2 Proposed itinerary and activities**

Activity	Place/location	Proposed dates

**2.3 Full details of cost of program**

*e.g. registration fees, resources required to complete the course, pre-approved travel and accommodation, etc.*

1		\$
2		\$
3		\$

<b>Total Cost of Proposal</b>	\$
-------------------------------	----

Contribution from College/Portfolio (if any)?	\$
---	----

Contribution from other sources; please specify (if any)?	\$
---	----

<b>*Amount requested from the Professional Staff Development Fund?</b>	\$
--	----

\* Maximum amount \$3,500 per application – see Professional Staff Development Fund website.

**3. APPLICANT'S DECLARATION**

I declare that:			
· I have read and understood the Professional Staff Development Fund website and my proposed professional development activity is consistent with these provisions.		Yes	No
· any time release in relation to this professional development activity proposal has been pre-approved by my supervisor.		Yes	No
· I have attached a copy of the activity brochure / flyer / outline.		Yes	No
<b>Applicant's Signature:</b>		<b>Date:</b>	

**4. SUPERVISOR'S RECOMMENDATION**

I confirm that:			
· the proposed professional development activity is relevant to the applicant's current role and/or career advancement within the University and is/will be recorded in the applicant's development plan.		Yes	No
· where appropriate, I approve the time release arrangements and/or the financial contributions related to the proposed professional development activity.		N/A	Yes No
I <b>RECOMMEND</b> this application for approval.			
<b>Supervisor's Name:</b>		<b>Telephone:</b>	
<b>Supervisor's Signature:</b>		<b>Date:</b>	

Supporting information/comments from supervisor (optional):

**5. APPROVAL**

To be completed by the appropriate manager of the College/Portfolio.

I <b>APPROVE</b> this application.		Yes	No
<b>Approver's Name:</b>		<b>Telephone:</b>	
<b>Approver's Signature:</b>		<b>Date:</b>	

Supporting information/comments from approver (optional):

Please send applications to: **Professional Development, People and Culture Division**

**6. ENDORSEMENT of funding availability/applicability by DIRECTOR, PEOPLE AND CULTURE (or delegate)**

I <b>ENDORSE</b> this application.		Yes	No
<b>Name:</b>		<b>Telephone:</b>	
<b>Signature:</b>		<b>Date:</b>	