THEATRE and DANCE INSTRUCTOR PROFESSIONAL DEVELOPMENT REQUEST FORM FY 2014-2015

NAME:	
EVENT:	_ DATE OF EVENT:
PURPOSE/PROJECT DESCRIPTION: 1) OBJECTIVES	
2) METHODS	
3) EVALUATION	
4) JUSTIFICATION	
ESTIMATED COST: Per diem Housing Travel Application fees Materials Tuition Other TOTAL	
DATE APPROVAL NEEDED BY:	
APPROVED:(SEE INSTRUCTION) N	OT APPROVED:(SEE INSTRUCTION)
SIGNED:IPD COMMITTEE CHAIR DATE	DATE

COMMITTEE COMMENTS: