



**GUAM COMMUNITY COLLEGE  
PROFESSIONAL DEVELOPMENT  
REQUEST FOR FUNDING APPLICATION FORM**

**FUNDING SOURCE: PROFESSIONAL DEVELOPMENT FUNDS: FOAP#:** \_\_\_\_\_

**TOTAL AMOUNT REQUESTED: \$** \_\_\_\_\_

**CATEGORY FOR WHICH FUNDING IS REQUESTED:**

\_\_\_\_\_ **CONFERENCE / WORKSHOP**

\_\_\_\_\_ **On-Island**

\_\_\_\_\_ **Off-Island**

\_\_\_\_\_ **MINI-GRANT**

\_\_\_\_\_ **GUEST SPEAKER / CONSULTANT FEE**

\_\_\_\_\_ **OTHER:** \_\_\_\_\_

**PROPOSED PROFESSIONAL DEVELOPMENT ACTIVITY:**

**LOCATION:**

**STARTING DATE:**

**ENDING DATE:**

**NAME:**

**DEPARTMENT:**

**SIGNATURE:**

**DATE:**

\_\_\_\_\_  
**SIGNATURE OF DEAN**

\_\_\_\_\_  
**DATE**



**GUAM COMMUNITY COLLEGE  
PROFESSIONAL DEVELOPMENT ACTIVITY  
REQUEST FOR FUNDING APPLICATION FORM**

- A) Description of Professional Activity:**
- B) State how the proposed professional development activity responds to the professional development priorities established by your department and the College.**
- C) State how the proposed professional development activity will enhance/improve student learning outcomes or student needs.**
- D) State how the proposed professional development activity connects with your overall professional development plans for improvement as a faculty at the College.**
- E) Provide an action plan of how you will implement what you have learned from the professional development activity. Provide objectives and timelines.**

Objective (s) and Activity (ies)	Target Date
*Provide faculty training during PDRC sponsored activities	Fall & Semester

\*May not delete

**F) COSTS:**

**Registration Fees..... \$**

**Transportation..... \$**

**Per Diem (no. days X cost)..... X = \$**

**Other\*..... \$**

**TOTAL COST \$**

**\*Complete only if requesting actual reimbursement.**

**G) Prior approved applicants must submit a Clearance Report Form (page 4) with the Dean's/Associate Dean's/Supervisor's Approval.**



**GUAM COMMUNITY COLLEGE  
PROFESSIONAL DEVELOPMENT ACTIVITY  
CLEARANCE REPORT FORM**

**DATE:**

**NAME:**

**MAILING ADDRESS:**

**CONTACT NUMBER:**

**POSITION TITLE:**

**DIVISION:**

- ☐ This is to certify that I have completed and fulfilled my obligations to the College as outlined in my last approved Professional Development Activity Application Form, Section E.

*Please provide a brief summary of how your educational plan was completed.*

<i>Objective/Activity</i>	<i>Target Date</i>	<i>Date of Completion</i>

- ☐ This section does not apply to me (not a prior approved applicant).

\_\_\_\_\_  
**APPLICANT'S SIGNATURE**

\_\_\_\_\_  
**DATE**

I have reviewed the Applicant's Professional Development Activity Application Form and certify that the applicant has completed and fulfilled all his or her obligations to the College as outlined in the last approved Professional Development Activity Application Form, Section E.

\_\_\_\_\_  
**DEAN'S / ASSOCIATE DEAN'S / SUPERVISOR'S  
SIGNATURE**

\_\_\_\_\_  
**DATE**

cc PDRC Chair, Human Resources Office

## EARLY DEPARTURE FUND RETURN OBLIGATION "PAYBACK"

This amendment to the Agreement is for the purpose of the Guam Community College and its faculty to recover money, all or in part, it has expended for the training of faculty members who depart from the college before the recuperation of its investment has been completed.

### Part 1:

When a faculty member receives financial assistance from the Professional Development Fund and leaves the employment of the Guam Community College before working for a one (1) year period after receiving the funds, the following table will be used to determine the amount of money to be paid back to the college.

Time Worked After	Amount of Return		
Funding:	For 12 month		
Truncated In	Faculty		Subtraction
Months			
0	100.0%		
1	100.0%		-\$200.00
2	100.0%		-\$400.00
3	100.0%		-\$600.00
4	88.9%		Of Net Balance
5	77.8%		Of Net Balance
6	66.7%		Of Net Balance
7	55.6%		Of Net Balance
8	44.4%		Of Net Balance
9	33.3%		Of Net Balance
10	22.2%		Of Net Balance
11	11.1%		Of Net Balance
12	0.0%		

"Net Balance" is defined to be the Gross amount funded minus the number of dollars in the "subtraction" column cell to the right

**Example:** A faculty member who receives \$2000.00 for a workshop and leaves GCC after 6 months, the amount to be returned would be  
 $66.7\% \text{ of } (2000 - 600) \Rightarrow .667 * \$1400 \text{ or } \$934.00$

### PART II: CERTIFICATION:

An employee who leaves GCC for employment elsewhere in his/her field and has gained certificates/endorsements through GCC funding within the 2 year period previous to his/her last day of employment at GCC will have a payback obligation to the college as follows:

- 1) If the certificates/endorsements were obtained within one (1) year previous to departure the payback will be 100% of the funding provided by GCC.
- 2) Otherwise the payback will be 50% of the funding provided by GCC.

Time will be measured from the last day of the training/class for which the certificate/endorsement was awarded.

This agreement must be attached to the application for professional development funds and signed by the applicant as a condition of funding.

This agreement must be signed and attached to any of the application/funding request identified below as a condition of funding approval. Original must be routed to Human Resource Office.

\_\_\_\_ Professional Development Funds \_\_\_\_\_ Specify Other  
\_\_\_\_ Staff Development Funds  
\_\_\_\_ Travel Authorization

Following are conditions protecting the employee and governing all returned funds.

A) If member wishes to challenge the payback, the member has ten (10) working days after notification to turn in a written appeal. Within five (5) working days, the president will convene a four (4) member committee to review the appeal. The committee shall be composed of two (2) faculty members selected by the Unit Chairperson, two (2) administrators and a fifth member chosen by the committee. This committee will give its findings and decision, in writing, to the president within ten (10) working days. The decision of the committee will be final.

B) All returned funds shall go into the faculty Professional Development Fund as moneys above the BOT appropriation and used, if possible, for training similar to that for which the initial appropriation was made. Returned funds will be available over a two year period in which to accomplish said training. If similar training requests are not initiated within 18 months of the "payback", the funds may be used for other training purposes following the PDRC guidelines for distribution.

C) In each case the time count is in completed full month increments and starts from the first working day after the training has been completed. i.e. if the training is over on July 15 and school starts on August 15, the time count starts August 15.

D) If an employee retires before the obligation to GCC is completed, the payback will be zero dollars. *(Note: during its September 19, 2001 meeting, the BOT stressed their desire to amend part D to include payback if the employee retires before his/her obligation to GCC is completed.)*

I agree to the terms and conditions of the Early Departure Fund Return Obligation "Payback" policy as described and approved by BOT at their November 14, 2001 meeting. The Early Departure Fund Return Obligation "Payback" policy will be used as a model for all employees at the college and be applied to all sources of funding for training.

FOAP# \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

c: Chair, PDRC

Revised: October 2009

Faculty Name: \_\_\_\_\_

Administrative Staff: \_\_\_\_\_

## Guam Community College

### Travel Request/Authorization Checklist

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1 Properly completed and filled out Travel Request/Authorization with authorized signatures?
<input type="checkbox"/>	<input type="checkbox"/>	2 Printed per diem rates for cities travelling to, from the following website: <a href="https://secureapp2.hqda.pentagon.mil/cgi-bin/pd-rates/cpdrates.pl">https://secureapp2.hqda.pentagon.mil/cgi-bin/pd-rates/cpdrates.pl</a>
<input type="checkbox"/>	<input type="checkbox"/>	3 Three price quotations from approved list of travel agents or airline? <i>note: please indicate last date to purchase tickets</i>
<input type="checkbox"/>	<input type="checkbox"/>	4 Memo or email requesting for advance per diem addressed to VP of Business and Finance, if applicable.
<input type="checkbox"/>	<input type="checkbox"/>	5 Hotel cost breakdown including taxes?
<input type="checkbox"/>	<input type="checkbox"/>	6 Registration/Conference fees with proper forms attached?
<input type="checkbox"/>	<input type="checkbox"/>	7 Signed administrative leave form with authorized signatures?
<input type="checkbox"/>	<input type="checkbox"/>	8 Is the travel required per existing contracts, law, or rule? <u>If yes, attach documentation. If not, explain.</u>
<input type="checkbox"/>	<input type="checkbox"/>	9 Is the airfare the lowest possible?
<input type="checkbox"/>	<input type="checkbox"/>	10 Is more than one (1) traveler attending the same conference, seminar, workshop, or meeting? <u>If yes, attach Department's Justification</u>
<input type="checkbox"/>	<input type="checkbox"/>	11 If travel is for "meeting", is documentation from meeting official indicating times, dates and purpose of meetings attached? Attach brochure of conference/training.
<input type="checkbox"/>	<input type="checkbox"/>	12 Is Travel Authorization being submitted 14 work days prior to travel commencement date? <u>If not, is explanation attached?</u>

**Guam Community College  
Travel Request/Authorization**

TA No.

1. TO <b>MATERIALS MANAGEMENT/ BUSINESS &amp; FINANCE</b>	2. FROM (Division/Department)	3. REQUEST DATE:
4. NAME OF TRAVELER	5. TITLE	6. BUDGET ACCOUNT CODE (FOAP)
7. TRAVEL DESTINATION(S):  FROM:  TO:		8. APPROX. LENGTH OF TRAVEL (DAYS)
		9. DATE TRAVEL COMMENCES
10. DESCRIBE ROUTE PLANNED:		
11. PURPOSE OF TRAVEL (Describe in Full - use reverse side if more space is required)		
12. TRAVEL ADVANCE REQUIRED (Attach memo requesting for any travel advances):		
13. SIGNATURE OF TRAVELER	14. SIGNATURE OF SECTION HEAD (Include Name and Title)	
15. SIGNATURE OF DIVISION HEAD (Include Name & Title)		
16. ESTIMATED TRAVEL COST		17. PAYABLE TO (Complete Name & Address)
A. TRANSPORTATION COST		
B. CONFERENCE/MEETING COST		
C. PER DIEM		
D. MISCELLANEOUS		
TOTAL COST		
		NOTE: Travel Policy specifies that airline tickets and meeting costs are to be paid through the Guam Community College Corporate Card, with minimum exceptions.
18. CERTIFICATION OF FUNDS AVAILABILITY: (Bus. & Fin. Div.)  <b>CARMEN K. SANTOS, CPA, V.P., Business &amp; Finance</b>		19. PRESIDENT'S APPROVAL:  <b>MARY A.Y. OKADA, President</b>
20. RECEIPT OF TRAVEL ADVANCE  Signature		

04/15/08



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TRAVELER:	TITLE:
DATE OF TRAVEL:	DESTINATION

<b>1. TRAVEL PRODUCTIVITY &amp; EVALUATION</b>
<p>A. Trip Objective(s): _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>B. Benefits Derived: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>C. Application of Trip to GCC: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>D. Professional Contacts Gained (include Addresses): _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

## Guam Community College

### TRIP REIMBURSEMENT

<b>DATE:</b>	<b>TA NUMBER:</b>	<b>DATE(S) OF TRAVEL:</b>	
<b>NAME OF TRAVELER:</b>		<b>TIME DEPARTED:</b>	<b>TIME RETURNED:</b>

Append a trip report to this document. The trip report should cover trip objectives and benefits derived. Include a copy of the TA and any related documentation provided with the TA. Provide two copies of this document. Travelers who want to claim actual expenses rather than per diem must also fill out a TR-03 form.

Were there any significant differences between the travel plan authorized on the TA and the actual trip?      ' YES      ' NO

If yes, please explain the changes below. Significant differences include a significant change in cost of travel, length of stay, or itinerary.

Explanation:

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When such differences increase the cost of the travel to the College, appropriate additional approval is required.

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Signature of Section Head (Include Name and Title)

Signature of Division Head (Include Name and Title)

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**EXPENDITURE REIMBURSEMENT CLAIMED:**

Provide appropriate documentation per the instructions of the Travel Policy and Procedures manual. This documentation should include a copy of the ticket and documentation on meeting or conference charges paid by the traveler.

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**PER DIEM CLAIMED:**

Number of days authorized travel times the standard per diem rate for the destination. (Indicate Amount less any advance claimed)

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**ADDITIONAL EXPENDITURES CLAIMED:**

Date: _____	Date: _____
Description: _____	Description: _____
Amount: _____	Amount: _____
Date: _____	Date: _____
Description: _____	Description: _____
Amount: _____	Amount: _____

GCC FORM TR-01

## TRAVEL FLOW CHART

1. Applicants must review the PDRC's Internal Operating Procedures and note the stated application deadlines.
2. Using the approved AY PDRC applications and checklist (if travel request), applicants must complete and provide the necessary documents and obtain signatures from Administrators. Faculty members are encouraged to seek the assistance of trained Administrative Assistants for travel requests.
3. Applicants should turn in the original application with electronic copy to any PDRC member before deadline.
4. Upon the committee's review, the applicant will receive a response letter within three working days.
5. If application is approved, the application is forwarded to the Section Head's/Dean's office within three working days.
6. If application requires additional information, the applicant may provide the information for committee review and get a response within three working days (depending on the content of the additional information).
7. If application is disapproved, the applicant will receive a response letter stating the reasons within three working days. In the event a faculty disputes the committee's response, the applicant may request to be placed on the agenda for the next scheduled PDRC meeting.
8. Signature of Section Head. Dean, for approval (2 days )
9. Signature of Division Head. AVP for approval (2 days )
10. Accountant for verification of FOAP funding availability. (2 days)
11. Materials Management processes TA requisition through the system and assigns a PO# (1 day)
12. VP of FA /Controller for certification of funds (1day)
13. President, for final approval. Once everything is signed, it goes back to Vivian to prepare the authorization to purchase ticket, conference fees, and any other items. (1 day)
14. Applicant should also obtain a copy of approved application form from Business Office for their personal records.
15. If the applicant has requested for advance per diem, the applicant should receive per diem from Business Office at least 1 day, before 12:00p.m., prior to the travel date.
16. The applicant must submit the trip report and reimbursement form to the Business Office within 10 days upon the completion of the travel. The applicant must also submit a copy of the trip report to any PDRC member within 10 days upon completion of the travel. Original copies of boarding passes and receipts must be submitted with the trip report.

**NOTE:** Please ensure that the Travel Request/Authorization Checklist is reviewed and checked off to ensure all documents are included.

# Travel Authorization Flowchart

