New York State/Graduate Student Employees Union Professional Development Program Evaluation

This Evaluation must be submitted within 30 days after completion of the project or activity funded with the Professional Development Program (PDP) funds. Failure to submit the Evaluation may result in not being considered for Professional Development Program funds in the future. After filling out this application form, print, sign and submit it as directed at the bottom of the form.

Last First MI Mailing Address Street Apartment/Unit # City State Zip Cod Phone No. (Work) (Other) Work Address Email Account Number Employee Number Academic Department/Program Assistantship Type: Teaching Assistant Graduate Assistant No. of Hours TE: Project / Activity Information Date of proposed project/activity: from to mo. / date / yr. Please check the category for which funds were awarded: Research (basic, applied, historical) Internship Curriculum or instructional material development Course work Workshop or seminar attendance Artistic or creative endeavor Conference attendance (without a formal role) Preparation of material for publication Grant proposal development Presiding Other Specify Other Specify Presenting Other Specify Other Spec				
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3.	Pro	ject or activity titl	e. (List	the name of semir	nar, workshop, etc. if a	applicable.)	
4.	Dic	d you complete th	e proje	ct or activity?	Yes	No	
	A.	If Yes, was your p	oroject (or activity objectiv	ve achieved?	Yes	No
	В.	Briefly describe h 250 words or few		project or activity	y contributed to your	professional develop	ment in
	C.	•	•		tivity or achieve your o e could have been achi	• • • •	lain why
Pa	rt C	Expenditure Sui	nmary				
۹. ۸	۱mo	unt Awarded:		PDP Funds	Other Sources	TOTAL	
3. /	Amo	unt Expended:		_ PDP Funds	Other Sources _	TOTAL	
Pa	rt D	: Comments or R	ecomm	endations			
Pr	ovid	e any comments o	or recor	nmendations pert	aining to the Professio	onal Development Pr	ogram.
Αp	plic	ant's Signature				Date	
Se	nd t	his Evaluation to:		nysgseulmc@oer. NYS/GSEU LMC Agency Building 2 Empire State Plaz Albany, NY 12223	, 8th Floor a		

It is the policy of the State of New York to provide for and promote equal opportunity in employment and equal access to all programs and services without discrimination on the basis of age, race, color, creed, national origin, military status, sex, sexual orientation, gender identity or expression, disability (including pregnancy-related disability or condition), predisposing genetic characteristics, marital/familial status, status as a victim of domestic violence, or prior arrest/criminal conviction record.