

## 2015 Professional Development Scholarship Application Form

Please submit the following form. Please type or print clearly. Applicant must be current OACADA member.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Institution

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
E-mail

**Please mark the Professional Development Opportunity you are applying for:**

NACADA National Conference

NACADA Summer Institute

Region 7 Conference

Tuition: Please list Degree Plan, Institution, course no., course description

Other: Please describe

**Awards:** OACADA will award up to \$150 to **reimburse** costs of the various professional development opportunities or college tuition.

**Please attach the following documentation with your application:**

- Resume
- Current Job Position Description
- Proposed activity: Include title, location, dates, scope (national/regional/state), and participation (attending/presenting)
- A statement of the benefit of this activity to individual professional development and how your activity will contribute to the accomplishment of institutional goals and objectives
- Two letters of recommendation

Submit application and required supporting materials to be considered OACADA scholarship by **January 30, 2015 to:**

Lisa Will, Professional Standards & Development Chair  
University of Central Oklahoma (405) 974-3612  
lwill@uco.edu

I certify that the information contained within this application is accurate and true. I understand that I will be responsible for any additional expenses related to the proposed activity. I understand that the scholarship award may be deemed as taxable income, which is my responsibility. If I am chosen as a recipient of the Oklahoma Academic Advising Association Professional Development Scholarship, I agree to participate in the proposed activity.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date