

# Professional Growth Report - Expense and Declaration

(approval for Category 6 and Category 7 expenditures required in order to avoid out-of-pocket expense)

| Academic Period |  |
|-----------------|--|
| Semester:       |  |
| Year:           |  |

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

Dept: \_\_\_\_\_

ID No. \_\_\_\_\_

Supervisor: \_\_\_\_\_

G.L. No. \_\_\_\_\_

P.G. Allocation: \_\_\_\_\_ P.G. Balance: \_\_\_\_\_

## EXPENSE CATEGORIES:

- Category 1: Professional Memberships
- Category 2: Professional Meetings
- Category 3: Professional Publications
- Category 4: Reference Resources

- Category 5: Academic Courses
- Category 6: Productivity Equipment/Electronics\*
- Category 7: Other (complete rationale section below for approval)\*

## REMINDERS:

- \* Electronic devices (and some other tangible items) are considered "Mixed Use" purchases unless they are:  
(1) permanently located on campus, and (2) declared property of the university.
- \*\* Purchases/expenses must be reported within thirty days for reimbursement.

### Reimbursable Professional Growth Expense: Categories 1 - 5

Attach copies of all receipts \*\*

| Date/Range | P.G. Category | Item/Description or Destination/Purpose | Lodging | Airfare | Mileage |      |        | Per Diem |      |        | Misc.          | Misc. Description | Line Totals |
|------------|---------------|---|---------|---------|---------|------|--------|----------|------|--------|----------------|-------------------|-------------|
|            |               |   |         |         | Miles   | Rate | Amount | Days     | Rate | Amount |                |                   |             |
|            |               |   |         |         |         |      |        |          |      |        |                |                   | -           |
|            |               |   |         |         |         |      |        |          |      |        |                |                   | -           |
|            |               |   |         |         |         |      |        |          |      |        | Total          | \$ -              |             |
|            |               |   |         |         |         |      |        |          |      |        | Approved Total | \$ -              |             |

### Declarable Professional Growth Expense: Categories 6 - 7

Attach copies of all receipts \*\*

↓ Check appropriate boxes ↓

| Date           | P.G. Category | Item/Description | Payment Method           |                          | Mixed Use*               | Amount |
|----------------|---------------|------------------|--------------------------|--------------------------|--------------------------|--------|
|                |               |                  | Personal Funds           | Corporate Card           |                          |        |
|                |               |                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | -      |
|                |               |                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | -      |
|                |               |                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | -      |
|                |               |                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | -      |
| Total          |               |                  |                          |                          |                          | \$ -   |
| Approved Total |               |                  |                          |                          |                          | \$ -   |

### Category 7 P.G. Expense Rationale (required for approval)

Attach additional explanation if needed

| Item | Development Goal and Proposed Use |
|------|-----------------------------------|
|      |                                   |
|      |                                   |
|      |                                   |
|      |                                   |

### Faculty Verification/Endorsement

|                   |      |
|-------------------|------|
|                   |      |
| Faculty Signature | Date |

### Administrative Authorization

|                                 |      |
|---------------------------------|------|
|                                 |      |
| Dean/Chair/Supervisor Signature | Date |