

**Benedictine Sisters Faculty Development Form**

**Applicant Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Title**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description**

**Specific Learning Outcomes/Benefit to the Students or to MMU**

**Itemized Budget**

*\*up to $1,000*

**Infrastructural Requirements**

*\*what equipment, supplies, lab space, office space, etc. will be needed?*

**Assessment**

*\*How will you measure the benefit of this program to the students?*

**Approvals**

Faculty/Undergraduate Research Committee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean of Faculty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Turn in form to Andy Henrickson, Chair of the Faculty Development Committee via email.***