

Specialist Training Program
 April 19 – May 1, 2009
 Application Form



To apply for 2009 CRD Specialist Training, please complete and return this form **via email** to both Michael Horn at Central Piedmont Community College (Charmaine Williams, Grants Administrative Specialist, will be handling administrative duties) and Allan Jimenez at CRD in Washington, D.C.. In addition, the **Certification Form** must be faxed to Michael Horn.

Michael Horn
 Associate Vice President
 Government Relations and Grants
 Central Piedmont Community College
Charmaine.Williams@cpcc.edu
 Phone: 704-330-5471
 FAX: 704-330-5476

Allan Jimenez
 Membership Services & Database Manager
 Council for Resource Development
allan.jimenez@crdnet.org
 Phone: 202-822-0750
 FAX: 202-822-5014

Michael Horn will notify you upon receipt of your application. If selected for 2009 Specialist Training you will receive a confirmation letter, and a representative from the Council for Resource Development National Office will invoice you directly.

Applications are due no later than Friday, March 27, 2009.

Total Program Fee/Tuition: \$1,300

Please note that no stipend will be paid and additional costs of travel, room and board must be paid by the applicant and/or their institution.

Please note:

The Burton Talmage Scholarship and the Specialist Training Alumni Scholarship reimburses the cost of tuition only.

Section A: Applicant Information

| | |
|--------------------------------------|--|
| Title: (Mr., Ms., Prof., Dr., etc.) | |
| First Name: | |
| Last Name: | |
| Position: | |
| Institution: | |
| Address: | |
| City, State, Zip: | |
| Phone: | |
| Fax: | |
| E-mail: | |
| Name, Title of Immediate Supervisor: | |
| Supervisor's Phone: | |
| Supervisor's Email: | |
| Name, Title of Institution CEO: | |
| CEO Phone: | |

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Section B: Questionnaire

Part 1- Please answer briefly.

1. How long have you worked in resource development?

2. What positions have you held in resource development (employers and job responsibilities)?

3. Why do you want to participate in the CRD Specialist Training program?

4. Why does your college want you to participate in this program?

5. Which areas of resource development most interest you? Why? (Please see CURRICULUM for related topics).

6. Please give a short description of your college (urban/rural, demographics, FTE and headcount).

7. How many FTE staff work in the development function at your college? List the responsibilities of each person and the percent time allocated to development.

8. What are your professional aspirations five years from now?

9. Will you attend the CRD National Conference in Washington, D.C. November 5 – 8, 2008?

10. Do you wish to be considered for the Burton Talmage Scholarship? Please read Section C below before responding.

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Section C: CRD Burton Talmage Scholarship

1. The Scholarship is awarded annually to a participant who completes the CRD Specialist Training Program.
2. The Scholarship *reimburses* CRD Specialist Training tuition only- \$1,300.
3. Applicants seeking this scholarship will be interviewed by the selection committee during the CRD National Conference in Washington, D.C. in November. **You must attend the National Conference to be considered for this scholarship.** The applicant rated highest overall in the following areas will be chosen for the award:
 - ♦ Reflects the high standards set by Burton Talmage in his professional and personal life.
 - ♦ Demonstrates a commitment to continuing a career in resource development, and
 - ♦ The extent of institutional support for the applicant.
4. The selection committee is comprised of the Past President of CRD, who chairs the Scholarship Committee, the Treasurer, and the Director(s) of the CRD Specialist Training Program. The recipient will be announced at the CRD National Conference in November.

Regional Scholarships

Many CRD regions offer full and partial scholarships to CRD members in their regions to attend the Specialist Training Program. Check with your regional director regarding the availability and application procedures for scholarships in your region (<http://www.crdnet.org/pubs/Regions.cfm>).

Section D: Payment Information

Michael Horn will notify you upon acceptance into the CRD Specialist Training Program. If selected for 2009 Specialist Training, the Council for Resource Development will invoice you directly. For payment questions, please contact Allan Jimenez at the CRD National Office at (202) 822-0750.

Total Program Fee/Tuition: \$1,300

Refund/Cancellation Policy: Only refund requests submitted in writing to the CRD National Office by **Monday, March 9, 2009** will be considered. Cancellations after this date will require the applicant to fulfill the \$1,300 obligation.

Note: Tuition must be paid before the Specialist Training commences.

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Section E: Certifications

A copy of the following statement must be signed and dated by your **Immediate Supervisor, the CEO of your Institution and yourself**. Please FAX the completed statement to Michael Horn at 704-330-5476.

If you have any problems, you can reach him directly by telephone at 704-330-5476.

Supervisor Approval:

I endorse the participation of _____ in the 2009 Resource Development Specialist Program. I understand that the program is two weeks in length, and **I will grant the participant leave of absence and release from regular duties for the period of participation**. I understand that as part of the cohort experience the participant will remain with the cohort throughout the two-week period including travel between the model college and Washington, D.C.

I understand the Council for Resource Development will require \$1,300 tuition payment for the training program. (The Council for Resource Development's National Office will invoice the participant upon acceptance into the program.) **I understand that no stipend will be paid and additional costs of travel, room and board must be paid by the applicant and/or my institution.**

CEO Signature

Date

Immediate Supervisor Signature

Date

Applicant: If selected to participate in the Resource Development Specialist Training Program, I agree to complete the program's full two-week term. My employer and I have agreed that I will be released from my regular duties during the two weeks of participation in the program. I further certify that all information contained in the application is true and correct to the best of my knowledge.

Signature

Date