



The Connecticut Association
for Health, Physical Education,
Recreation and Dance

PROFESSIONAL DEVELOPMENT GRANTS 2018 – APPLICATION FORM

**EASTERN DISTRICT SHAPE AMERICA CONFERENCE
January 28-30, 2018 – Burlington, Vermont**

Name:

Date:

CTAHPERD Membership Number:

School/Agency:

Work Address:

Work Phone:

Preferred Email:

Home Address:

Home Phone:

Signature of administrative authorization:

Grant for \$200 towards conference registration fee & housing:

If awarded the 2018 Professional Development Grant to attend the Eastern District SHAPE America Conference January 28-30, 2018 in Burlington, Vermont, I will complete the evaluation form and submit it for reimbursement with receipts indicating my conference registration and housing expenses.

Signature of CTAHPERD member: _____ Date: _____

