



Professional Development

SUNY BROOME

Planting the Seeds for Tomorrow's Success

BCC Foundation Sunshine Fund

The BCC Foundation Sunshine Fund for Cross-Disciplinary Collaboration Grant is designed to stimulate and encourage faculty (full- and part-time) from different academic areas to work together to develop new ways to teach their courses. A cross-disciplinary approach to teaching is one which employs the teaching of one discipline through the lens of another discipline (e.g., how physicists explore music, sociological perspectives on the purpose of religion, etc.). The award is in memory of Harold Sunshine, who served as a former professor at SUNY Broome for 30 years and was instrumental in the college's hockey program.

Ideal project proposals will incorporate faculty from different academic areas working together to develop new and innovative ways to teach their courses. Collaboration could also include faculty working with community agencies and organizations in which service learning and non-traditional forms of teaching are explored and implemented. Eligible expenses for this grant may include, but are not limited to, faculty professional development to aid in the implementation of the project and materials and supplies.

The Professional Development Steering Committee (PDSC) will issue a "Request for Proposals". Proposals will be collected and reviewed by the PDSC using the Sunshine Fund Grant rubric. Awards of up to \$2,000 are made for funding projects during the current academic year. Award funding must be spent by the last day of June (of the year the application is approved) and the required work associated with the funded project must be completed by the last day of August (of the year the application is approved).

When making decisions concerning the allocation of funds, the Professional Development Steering Committee (PDSC) takes numerous factors into consideration, including, but not limited to, the following:

- Projects that support academic and [strategic initiatives](#).
- Promotes a level of interdisciplinary and/or community agency/organization collaboration.
- Brings innovation new to campus or to area/division; and/or, results in innovative teaching methods.
- Promotes a cross-disciplinary approach to teaching.
- The number of SUNY Broome students and/or faculty impacted (or potentially impacted) by project.
- The project's impact on the learning experience of SUNY Broome students.
- Projects that will have impact(s) extending beyond the project timeline/grant cycle.
- Projects that are easily transferred or expanded beyond the pilot to other students, classrooms and/or areas of campus.
- Projects where the budget clearly corresponds to the project concept form.
- Projects not typically funded through PDAP or departmental operational funds.
- Projects considered to be above and beyond the course development and/or other responsibilities expected as part of the faculty role.
- Projects that have measurable outcomes that address specific Institutional and Course Learning Outcomes (ILOs and CLOs).
- Projects where technology requests are supported within the current IT support structure or have

approval of the IT department.

- Projects that do not have continuing costs, or have continuing costs supported by other sources.
- Completed applications received by the announced deadline will receive full consideration

Full and part-time teaching and non-classroom faculty who have a project that influences teaching and learning will receive equal consideration for the Sunshine Grant funding.

The PDSC may choose to use the following strategies when allocating limited funds:

- Reduce the maximum awarded to a project.
- Fund selected initiatives based on the above and other considerations. This implies that not all initiatives may be funded.

Sunshine Fund Application Process

1. Complete a Sunshine Fund Project Concept Form.
 - a) Identify and document the problem/question/situation your idea addresses.
 - b) Propose a solution and implementation process.
2. Complete a Project Expense Sheet.
3. Submit a project end report detailing the project outcomes no later than by August 31, 2020.
4. Submit the completed Project Concept Form and Project Expense Sheet, including all necessary signatures and documentation, in an envelope, to the Teaching Resource Center (LI 101 or mail stop #56) by Friday, January 17, 2020 by 3:00 p.m.

All current and required forms are located on the Professional Development Website:

www.sunybroome.edu/prodev For questions on how to complete the forms, please contact the TRC at 778-5611.

SUNSHINE FUND PROJECT CONCEPT FORM

Project Title

Project Initiator

Dept. Title

Funding Source (if known)

Chair's Review (Signature)

Date:

Deans Approval (Signature)

Date

Application Deadline

Start/End Dates of Grant

1. Description of Evidence-based Need

- Please describe the current problem, question, or situation this project will address (e.g. data, research, department statistics):
- What is the need or want, resulting from this problem/question/situation?
- How will this project address this problem/question/situation?
- What specific strategic directive will the project address? (Please refer to the current published [Strategic Directions on the SUNY Broome Institutional Effectiveness website](#).)

2. Target Population

- Who will the project serve? Does it easily transfer or expand beyond the pilot to other students, classrooms and/or areas of campus?
- How many?
- Please describe how this project will enhance SUNY Broome students' learning experience:

3. Project Description

- Please describe, in detail, how this project will encourage interdisciplinary and/or community agencies/organization collaboration:
- Please describe, in detail, the cross-disciplinary approach to teaching that this project will employ/develop:
- Please describe, in detail, the innovative teaching methods this project will promote:
- Please describe, in detail, the project's objectives and expected outcomes and how they relate to specific Institutional and Course Learning Outcomes (ILOs and CLOs).
 - How will the project be measured for success? (Please provide measurable outcomes that address the above stated project objectives & outcomes.)
- Where will the project be carried out?
- Who will be the key players in the project?

4. Project Duration

- What is the anticipated project duration?
- Will the project's impact extend beyond the project timeline?

5. Project Needs and Costs (Outline costs)

- Will this project have continuing costs, and if so, how will that be funded?
- What if any equipment will be needed?
- Computer Resources: data, phone, network and licensing needs or requirements
Note: Be sure to list the needed equipment and costs, including computer resources and, if applicable, confirm that Information Technology Services has been consulted regarding any technology needs.
- What if any supplies will be needed?
- Will the project need personnel?
- Please describe any training and/or travel needs
- Facilities, Furnishings, Space requirements
- Please describe any other needs

6. Acknowledgement of End-of-Year Report

- Submit a project end report within 30 days of completion, detailing project outcomes. Signature required below.

Signature of Faculty/Staff _____ Date _____

SUNSHINE FUND PROJECT EXPENSE FORM
(Page 1 of 2)

Applicant Name

Project Name:		Date Created:	
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Equipment

	DESCRIPTION		
	a. Phone		\$
	b. Data and Network connections		\$
	c. Licensing		\$
	d. Software		\$
	e. Other		\$
Subtotal			\$

Supplies

	DESCRIPTION		
			\$
			\$
			\$
			\$
Subtotal			\$

Personnel

	DESCRIPTION		
			\$
			\$
			\$
Subtotal			\$

Training

	DESCRIPTION		
			\$
			\$
			\$
Subtotal			\$

Travel (Includes Transportation, Food, Lodging, Registrations, etc.)

	DESCRIPTION		
	a. Registrations or Fees		\$
	b. Transportation		\$
	c. Lodging		\$
	d. Food		\$
Subtotal			\$

SUNSHINE FUND PROJECT EXPENSE FORM
 (Page 2 of 2)

Space, Facility, Other Requisites (List all Facilities requirements i.e. space, electrical, furniture, etc.)

	DESCRIPTION		
			\$
			\$
Subtotal			\$
Other Costs			
	DESCRIPTION		
Subtotal			\$
GRAND TOTAL			\$

TRAVEL FORM PROCEDURE

SECTION 1: TO BE COMPLETED PRIOR TO TRIP

1. Traveler completes information on Travel Authorization Request Section 1 including organization account # (see Purchasing Contact) name, destination, Banner ID, purpose, and estimated total travel expenses.
2. Traveler or immediate supervisor completes estimated source of funding column.
3. Proper signature(s) are obtained for the travel authorization approval section.
4. If mode of transportation is auto, College car must be requested. Mileage reimbursement available only if College car is unavailable. Notify supervisor of additional cost and revise estimated expenses if necessary. College car approver returns form to appropriate Purchasing Contact.
5. If budget transfer is required, budget transfer form must be completed and processed before the requisition can be encumbered. Funds for travel expense should come from the appropriate budget.
6. Travel cost center Purchasing Contact creates one requisition for each person for total approved College funds to be paid by that cost center: Please enter destination and date(s) of trip on requisition form in description field. Type requisition number on front of form Section I. Return Travel Form to traveler.
7. Approver approves requisition.
8. Traveler obtains travel advance from FSA if desired. (Use requisition number on Travel Advance Form). NOTE: FREE PARKING IS AVAILABLE AT BROOME COUNTY REGIONAL AIRPORT IF YOU PRESENT A COPY OF THE APPROVED TRAVEL AUTHORIZATION TO THE ATTENDANT.

WHEN REGISTERING IN A HOTEL PRESENT A "TAX EXEMPTION CERTIFICATE" ST-129 AVAILABLE IN CAMPUS FORMS, MY College Finance Tab and ACCOUNTS PAYABLE.

SECTION 2: TO BE COMPLETED AFTER THE TRIP

9. After trip, traveler completes travel expense sheet (Section 2) reflecting all expenses for the trip. Attach all original receipts to completed Travel Form and give to Purchasing Contact. See Travel Expense Sheet instructions for specific guidelines.
10. Purchasing Contact completes Actual column in Source of Funding section and modifies requisition to reflect actual approved college funds, dates and destination.
11. Completed travel form with all receipts attached is forwarded to Accounts Payable.
12. Accounts Payable reviews and generates check for college funds and professional development funds (iff applicable).
13. A/P sends check to traveler.

SECTION 1

TRAVEL FORM

Travel Authorization Request (to be completed before travel)

Organization # _____ Account# 7455 Requisition# _____
 Name: _____ Banner ID: _____
 Destination: _____ Purpose: _____

Travel must be College business, per *Purchasing and Contract Guidelines and Procedures Handbook and Section 77b of the General Municipal Laws of the State of New York*

ESTIMATED TRAVEL EXPENSES	Date of Departure & Return	Time of Departure & Return	Transportation Cost	Hotel	Breakfast	Lunch	Dinner	Registration	Other Amount	Total

SOURCE OF FUNDING

Approved College Funds _____
 Professional Development Funds _____
 Other Sources _____
 TOTAL COST _____

Estimated	Actual *

*Fill in "Actual column" when travel is completed.
 Funding will be applied to travel expenses as follows: College funds will be applied first. Other funding as indicated above will be applied to the remaining reimbursable expenses

TRAVEL AUTHORIZATION APPROVAL

I hereby approve the travel request: Approved: Yes No
 _____ Date: _____
 Cost Center Head's Signature
 Additional signature required if Cost Center Head is traveler:
 Approved: Yes No
 _____ Date: _____
 Dean, VP, or President as Required

For Accounts Payable Use Only

MODE OF TRANSPORTATION

College Car
 Other Riders: _____
 Other Mode: _____
 Mileage reimbursement guidelines require the cost to be charged to the traveler's cost center.

COLLEGE CAR APPROVAL:

Driver's License # on file: Yes No
 Car Assigned: _____
 _____ Date: _____
 Signature

SECTION 2 Actual Daily Travel Expenses (to be filled in after completion of travel)

(PLEASE ATTACH ORIGINAL PAID RECEIPTS, REGISTRATION FORM, BROCHURE, PROGRAMS, ETC.)

ACTUAL DAILY TRAVEL EXPENSES	Day of the Week	Travel Dates	Time of Departure & Return	Transportation Cost	Hotel	Per Diem Breakfast	Per Diem Lunch	Per Diem Dinner	Registration	Other Amount	GRAND TOTAL
	List each day separately										
ALL Expenses Must Be Shown											
	Mileage Reimbursement If Applicable	Miles Driven X Contracted Rate	\$Amount								
Column TOTAL											

- Please return this form and all original paid receipts showing payment for hotels, transportation cost, boarding pass, tolls, garage fees, and registration to Accounts Payable.
- Time of departure and time of arrival is from and to Broome Community College or home.
- Free parking is available at Broome County Regional Airport. You must present a copy of the approved Travel Authorization to the attendant

I hereby certify that the foregoing claim presented against Broome Community College is just, true and correct: that the claim herein presented is justly due and that the amount claimed has not been paid or satisfied.

Traveler's Signature: _____ Date: _____

Proposal Title _____

Project Concept Form & Expense Sheet (Circle one)

Yes No

Submitted on Time (Circle one) Yes No

Date Submitted _____

Total Score _____

RATINGS: 4 = Clearly specifies 3 = Not stated but understood 2 = Stated but unclear 1 = Not stated or understood

THIS RUBRIC WILL BE COMPLETED BY THE PROFESSIONAL DEVELOPMENT STEERING COMMITTEE. It is included in this packet to demonstrate how the PDSC will be evaluating applications.

EVIDENCED BASED NEEDS				TARGET POPULATION			PROJECT DESCRIPTION					
Describes the current problem, question or situation the project will address	Identifies the need or want, resulting from the problem, question or situation	Explains how the project will address the problem or situation	Outlines the Strategic Planning Goal the project will address	Indicates who the project will serve and delineates whether it is transferable to other students, classrooms and/or to other areas on campus	Identifies the number of people served	Specifies how the project will enhance SUNY Broome students' learning experience	Delineates in detail how project will encourage interdisciplinary and/or community agencies; organization collaboration	Outlines, in detail, the cross-disciplinary approach or teaching that this project will employ or develop	Specifies in detail, the innovative teaching methods this project will promote	Identifies in detail the project's objectives and expected outcomes and how they relate to specific Institutional and Course Learning Outcomes (ILOs and CLOs)	Describes where project will be carried out	Indicates who the key players in the project will be

Over

SUB-TOTAL PAGE 1 _____

RATINGS: 4 = Clearly specifies 3 = Not stated but understood 2 = Stated but unclear 1 = Not stated or understood

PROJECT DESCRIPTION CONTINUED		DURATION		PROJECT NEEDS AND COSTS								END OF PROJECT REPORT
Explains how the project will be measured for success (i.e. measurable outcomes)	Explains the expected outcomes of project	Indicates the duration of the project	Outlines whether the project's impact will extend beyond the project timeline	Identifies whether the project will have continuing costs, and if yes, indicates how it will be funded	Delineates equipment needs and costs	Confirms consultation with IT, if applicable	Specifies supply needs and costs	Outlines personnel needs and costs	Indicates training or travel needs and costs	Provides information regarding facilities, furnishings and space requirements needed	Furnishes insight about other project needs and costs	Acknowledges the need to submit an end of project report

*For PDSC Scoring: X3 = Evidence Based Needs; Project Description
 X2 = Target Population
 X1 = All Remaining Categories

SUB-TOTAL PAGE 2 _____

GRAND TOTAL (PAGES 1 + 2) _____

PDSC MEMBER NAME _____ DATE _____