

The Baskin Award

INSTRUCTIONS & APPLICATION

The Baskin Fund is a financial award given to **full-time graduate faculty** to offset the registration, travel, and accommodation (no food or beverages) costs related to professional and academic development events such as conferences, meetings, festivals, and workshops.

The Baskin Fund Committee reviews all applications and selects recipients each semester based on applicant needs and availability of funds. Successful recipients of this award are advised, via email, of the amount of their award which may be up to \$500. If an application is not approved, the Committee advises the applicant, via email, as to why the application was rejected.

Note that funds awarded will only be disbursed upon the recipient's completion and submission of the College's expense reimbursement form. Be sure to keep all applicable receipts.

GUIDELINES

Following are the application guidelines for The Baskin Fund:

- The Fund is for **full-time graduate faculty** only.
- Applications may be submitted once during each academic year.
- Applications must be submitted at least one month prior to the date of the professional or academic development event.
- Send completed Baskin Fund Application Forms to Kelli Connell, Photography Department, 12th floor, 600 S. Michigan Avenue.
- Funds may be used to defray the cost of applicable registration fees, travel (air fare, taxis, parking), and accommodations. The cost of food and beverages are not covered by this award.

After attending the professional or academic event, recipients of this award:

- Complete the College's expense reimbursement form (being sure to include original copies of all applicable expenses) and submit it to Keith Cleveland, Dean of Graduate Administration & Student Services, Rm. 200C, 600 S. Michigan Avenue.
- The completed expense reimbursement forms and accompanying receipts are then forwarded to Accounting.
- Accounting reviews the forms and issues a reimbursement check to the full-time graduate faculty.

NOTE: Should Accounting determine that some receipts fall outside the parameters the College has set for faculty reimbursement, those monies will be deducted from the reimbursement. If Accounting determines that the receipt documentation is incomplete, Accounting will contact the full-time graduate faculty member directly to discuss resubmission of documentation to satisfy Accounting's requirements.

SUBMITTING THE APPLICATION

Full-time graduate faculty must complete this application form and secure the signature of their respective graduate program chairperson, director, or coordinator. Graduate faculty must be full-time faculty during the semester the funds are allocated. Application forms *must be submitted* no later than a month before the date(s) of the event.

NOTE: We are accepting applications for professional and academic development events through August 2008. Applications must be received no later than **Friday, May 23, 2008** for consideration.

Please send this completed application to:

Kelli Connell
Photography Department, Suite 1200
600 South Michigan Avenue
Chicago, IL 60605

The Baskin Fund Committee will select recipients each semester based on applicant needs and availability of funds.

Columbia

C O L L E G E C H I C A G O

INNOVATION IN THE VISUAL, PERFORMING, MEDIA,
AND COMMUNICATION ARTS

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CONTACT INFORMATION

Name: _____ Social Security Number (optional)*: _____

Graduate Department: _____

Telephone Contacts: Office Phone #: _____ Alternate Phone #: _____

Columbia Email Address: _____

Alternate Email Address (if available): _____

Street Address: _____ Apt: _____

City: _____ State/Province: _____ Postal/Zip Code: _____

* Social Security Number will be eventually required in order to submit the check request to Accounting.

PROFESSIONAL DEVELOPMENT EVENT INFORMATION

Name of Event: _____

Location of Event: _____

Dates of Event: _____

Event (registration) Fee: _____

Amount requested (up to \$500): _____

BRIEFLY describe how this event will further your professional development:

SIGNATURES

Applicant's Signature: _____ Date: _____

Graduate Program Chairperson Name [Printed]: _____

Graduate Program Chairperson Signature: _____ Date: _____

Amount of funds contributed by Graduate Faculty's department: _____