## Arizona SARE Program Professional Development Travel Scholarship Application

Name:	Phone:			
Address:	City:	State:	Zip:	
Email:	Position:			
Name of conference, date, location conference information)	, agenda (provide a copy	of the program or p	provide web site URL	with the
Cost of travel: (Document costs in	cluding lodging, meals, 1	registration and othe	er items)	
Answer the following five questions extension programming, your organ			ravel funds to have on	
1. Specifically, what do you hope t	to learn by attending this	training?		
2. When you return home, with wh audience?)	om will you share the le	arned information?	(Who is your target	
3. Do you have a specific activity i producers or other programming	_		-	ecific

4.	Do you have plans to incorporate this topic or subject area into existing programming or projects? If so, please briefly describe:
5.	Do you have an estimate of how many people you might reach with knowledge you gain from receiving this scholarship? If so, please share that estimate:
6.	Briefly describe how you plan to measure the impacts of implementing the knowledge gained from the attended training.

## SARE PDP State Plan Evaluation Report Form Travel Scholarship

<b>State:</b>	
<b>Grantee:</b>	
Year:	

Funding Recipient: Agent/Educator:	Activity/ Resource for which funds were used:	Amount used:	Date of program:	New knowledge gained and how you plan to share it: