

**SUBMIT COMPLETED FORM TO PROFESSIONAL LEARNING COMMITTEE STAFF SUPPORT**

Name Alyssa Graff Date 10/28/25

Department PRIE Email ajgraff@marin.edu

Title of Activity: Caring Campus Conference

☐ Meeting ☒ Conference ☐ Workshop ☐ Credit class ☐ Noncredit class ☐ Webinar

Sponsored by: Institute of Evidence Based Change and Chancellors Office

Location: San Deigo ☒ In person ☐ Online

Dates of Leave: From 11/12 to 11/14 ☒ All day or hours \_\_\_\_\_

Describe the job-related benefit of this activity: (Include a web link or attach promotional materials for the event.)

After your event, you will be asked to complete a brief survey about the activity.

**TITLE V FUNDING AUTHORIZED USES**

Activities funded by Title 5 Staff Development Funds must be related to one of the following authorized uses. Please check all categories that apply.

- ☐ 1. Improvement of teaching
- ☒ 2. Maintenance of current academic and technical knowledge and skills
- ☐ 3. In-Service training for vocational education and employment preparation programs
- ☐ 4. Retraining to meet changing institutional needs.
- ☐ 5. Inter segmental exchange programs
- ☒ 6. Development of innovations in instructional and administrative techniques and program effectiveness.
- ☐ 7. Computer and technological proficiency programs.
- ☐ 8. Courses and training implementing affirmative action and upward mobility programs.
- ☒ 9. Other activities determined by the Board of Governors to be related to educational and professional development pursuant to criteria established by the Board of Governors of the California Community Colleges, including but not necessarily limited to programs designed to develop self-esteem.

**BUDGET INFORMATION**

All items must be completed or the form will be returned.

Roundtrip transportation:

Car: \_\_\_\_\_ miles @ \_\_\_\_\_ /mile = \$ \_\_\_\_\_ 0

Airfare: \$ \_\_\_\_\_ 253

Other: \_\_\_\_\_ \$ \_\_\_\_\_

Hotel: Your cost for 2 nights is \$ \_\_\_\_\_ 300

Conference fee: \$ \_\_\_\_\_ 750

Meals: \$ \_\_\_\_\_

Other Fees: \$ \_\_\_\_\_

Total travel cost: \$ \_\_\_\_\_ 1303

Amount to be paid from Staff

Development Funds: \$ \_\_\_\_\_ 500

Difference to be paid from other funds \$ \_\_\_\_\_ 803

Staff Development FOAP: 11100-51001-52000-675000

**SIGNATURES**

 10/28/2025  
Alyssa Graff (Oct 28, 2025 10:10:13 PDT)

Employee's Signature Date



Supervisor's Signature Date

\_\_\_\_\_  
Chair, Professional Learning Committee Date

\_\_\_\_\_  
Asst. VP of Instruction, Budget Manager Date