



The Graduate College

Graduate Program Coordinator Workshop Application Cover Sheet

First Name _____ Last Name _____

College _____ Department _____

Phone _____ Email _____

Summer salary will be awarded once the following criteria are completed:

- Participate each day in the face-to-face workshop on campus May 21, 22, 23, and 24 from 9am until 4pm, including a working lunch
- Submission of a final Strategic Marketing and Recruitment Plan on or before May 31

I understand participation in this workshop will impact the limit of my summer workload and the \$2,000 stipend is considered part of the 33.3% limit for summer compensation of 10-month faculty.

I understand that I must submit this cover sheet via email as a PDF attachment or via campus mail in addition to the online form in order to be considered for participation.

Applicant Signature

Date

I approve this faculty member's participation in the workshop and have verified that participating in this training will impact the limits of their summer workload.

Department Chair Signature

Date

College Dean Signature

Date

Please submit this cover sheet with signatures to Dr. Jennifer Purcell at jpurcell@kennesaw.edu or via campus mail Attn: Dr. Jennifer Purcell, Kennesaw Hall, MD 0112.