

## Faculty Success Program Application

Name:

Email:

Telephone:

Department:

School/College:

Faculty Rank/status:

Years in rank/status:

1. What aspect of the Faculty Success Program inspired your application?
2. How will participation in the program improve your productivity and/or work/life balance?
3. Describe the outcome(s) or project(s) you anticipate benefiting from your participation.

YES I have discussed my application with the dean of my school and I have their financial support to match 50% funding for the program (total cost for program is \$4,650).

YES I understand that the program is May 14– August 5, 2023 and I will be available to participate

YES I understand that following completion of the 12-week program, I will be required to submit a brief report to the ODEI that includes (but need not be limited to):

- A statement of your overall assessment of the program including specific ways in which you benefited from the program
- Suggestions as to how the program could be improved
- Description of any best practices or ideas identified as a result of this program that should be considered at UAB

Submit the completed form and a copy of your CV to [inclusion@uab.edu](mailto:inclusion@uab.edu) by Monday March 13, 2023