

PROFESSIONAL ACTIVITIES PROJECT PLAN AND FINANCING REQUEST

Calendar Year 2000

1. PROJECT TITLE Centennial Subsection Professional Training	
2. SPONSORING SECTION/COUNCIL/AREA/CHAPTER Denver Section and Centennial Subsection	
REGION 5	
3. TREASURER/ADDRESS James West 7329 S. Tamarac Ct. Englewood, CO 80112	4. PROJECT MANAGER/ADDRESS/PHONE James West 7329 S. Tamarac Ct. Englewood, CO 80112
5. STATEMENT OF OBJECTIVES Provide professional training opportunities for Centennial Subsection members. Centennial Subsection members live 90 miles from Denver & are able to attend Denver Section Activities. The Denver Section would like to hold an event in the Cheyenne, WY area. The Centennial Subsection has been inactive for 4 years due to lack of activities. The Denver Section would like to use the event to promote IEEE activities in the area.	
6. PLANS FOR ACHIEVING OBJECTIVES A program of professional training will be offered by the Section.	
7. HOW ACHIEVEMENT WILL BE MEASURED Conducting training class in Management Skills using Ben Leichtling Management Class.	
8. HOW MANY MEMBERS WILL BENEFIT FROM THIS PROJECT? 30 members & 20 students are projected to attend the meeting.	

Use additional sheets if necessary
After completion, send this form to your Regional PACE Coordinator

January 2000

9. ACTIVITIES (list the major activities required for project achievement and the targeted completion dates):	
Activities	Dates
1. Conference Plan	12/15/00
2. Speaker Confirmation	1/15/01
3. Conference	4/2001
10. FUNDING REQUIREMENTS (refer to activities above by number):	
Type of Expense	Amount
1. Speaker honorarium	\$ 300.00
2. Speaker room/ hotel expenses	\$ 100.00
3. Meals, other & travel expenses	\$ 300.00
4. Conference Expenses	\$ 500.00
TOTAL FUNDING REQUIRED	\$ 1200.00
11. PROJECT FUNDING SOURCES	12. DISBURSEMENTS
Region \$ 500.00 Section \$ 400.00 Subsection \$ 300.00 Project Income \$ 0 Employment Assistance Cmte. \$ 0 Other \$ 0	1) Regional Funds Advance disbursement (pre-event cost) \$ _____ Final disbursement \$ _____ 2) EAC Funds Advance disbursement \$ _____ Final disbursement \$ _____ TOTAL \$ 0
13. PROJECT APPROVAL	
_____	DATE: _____
PACE Chair (Section/Area/Council/Chapter)	
_____	DATE: _____
Chair (Section/Area/Council/Chapter)	
_____	DATE: _____
Regional PACE Employment Assistance Program Coordinator (if applicable)	
_____	DATE: _____
Regional PACE Coordinator	
_____	DATE: _____
Regional Director	