

## **STPP Student Career Development Grant Application**

Submit the completed application to the STPP Program Manager ([walshce@umich.edu](mailto:walshce@umich.edu))  
prior to the professional development activity.

**NAME:**

**Uniqname:**

**UMID:**

**Department/Program:**

**Date accepted to STPP Program:**

**Anticipated graduation (Month/Year):**

**List the STPP courses you have already completed:**

**List the STPP courses you are currently enrolled in:**

**Event title:**

**Event date and location:**

**Event website (you may attach a brochure or announcement):**

**Describe the event and how it is related to STPP (in no more than 100 words):**

**Describe how this event will enhance your professional development (in no more than 300 words):**

**Provide a detailed budget, including other sources of support (requested and received).**