

Professional Development Funding Form

Patty Morgan Scholarship Application

Please have your employer complete this form verifying the amount of funding that will

be provided to you during the two-year VT-HEC program.	
Name of Applicant:	
Name of Employer:	
Indicate the anticipated amount of professional development funding this applicant will receive in	
2025 - 2026:	
2026 - 2027:	
Name:	Position:
Signature:	Date: