



**ONTARIO SECONDARY SCHOOL TEACHERS' FEDERATION
DISTRICT 11 THAMES VALLEY**

680 Industrial Road, London, Ontario, N5V 1V1

Telephone: (519) 659-6588 Facsimile: (519) 659 – 2421 E-Mail: osstf11@execulink.com

**EDUCATIONAL SERVICES COMMITTEE (ESC)
REQUEST FOR FUNDING ASSISTANCE FOR INDIVIDUAL P.D. ACTIVITIES 2017/2018**

This form is for members of District 11 to request funds from the Educational Services Committee to pursue professional, curricular and educational issues and to support the goals of Professional Development in the District for the year **2017/2018**.

Please note the following:

1. The maximum funding is **\$175.00** per individual for one P.D. activity this school year.
2. The ESC reserves the right to distribute PD funds equitably among District 11 workplaces.
3. Applications should be received prior to the activity.
However, retroactive grants will be considered in September and October for summer professional development.
4. Eligible items: registration, accommodation, transportation costs (with receipts) for one round trip from home to event location, course/workshop related materials, meals (maximum allowed \$10 for breakfast, \$20 for lunch; \$30 for dinner/day).
5. Items not funded: - class coverage, courses that may result in system or salary advancement, or other expenses deemed ineligible by the Ed Services Committee.
6. Funding approval is contingent upon your request for school/department funds.
7. Members are required to submit their conference receipts to the OSSTF District Office by 21 calendar days following the PD event or funds may be allocated to other members' PD.
8. All funding requests must be received in at the District Office by **May 15, 2018**.

Please complete the form and forward to Educational Services Committee at the District Office via email osstf11@execulink.com. You will receive confirmation of the Committee's decision within 10 days after the next scheduled Ed Services meeting. You will be required to submit original receipts for all claimed expenses unless other arrangements are agreed to in advance.

REQUEST FOR FUNDING ASSISTANCE (Please Print)

Member's Name: _____ Workplace: _____

Home Address (please include postal code): _____

Personal email address: _____

Name of P.D. Activity _____ Location of P.D. activity (city, town) _____

Date of Request: _____ Date of Event: _____

Rationale for Attending: _____

(Registration Form, Brochure or Event Information MUST accompany application)

Projected costs:

Registration \$ _____ Travel \$ _____ (include receipts)

Accommodation \$ _____ Meals \$ _____

Other \$ _____ for _____ (specify)

Total Costs \$ _____

Total assistance from own workplace: \$ _____ from _____

Please indicate if you've applied for PD funds from your school/location. Yes No

(Applicants must request support from school PD funds in order to be considered for District approval.)

Total amount requested from OSSTF District 11 \$ _____

(Maximum \$175.00)

Applicant's Signature