



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

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EDUCATIONAL SERVICES COMMITTEE (ESC)

REQUEST FOR FUNDING ASSISTANCE FOR INDIVIDUAL P.D. ACTIVITIES 2019/2020

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 **2019/2020**.

Please note the following:

- The maximum funding is **\$175.00** per individual for one P.D. activity this school year.
- The ESC reserves the right to distribute PD funds equitably among District 11 workplaces.
- Applications should be received prior to the activity.
- However, retroactive grants will be considered in September and October for summer professional development.
- Eligible items: registration, accommodation, mileage for one round trip from home to event location, course/workshop related materials, meals (maximum allowed \$10 for breakfast, \$20 lunch; \$30 dinner/day with receipts).
- Items not funded: - occasional teacher coverage, courses that may result in system or salary advancement, or other expenses deemed ineligible by the Ed Services Committee.
- 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.
- All funding requests must be received in at the District Office by **May 15, 2020**.

Please complete the form, in one of the following ways:

- Open in Adobe Reader and type in your information, then print to sign, OR
- Print the form and fill in

Finally, scan the completed form and any required documentation, and forward to the Educational Services Committee at the District Office via email chriswismer@osstf11.com

You will receive confirmation of the Committee's decision approx. 10 days after the next scheduled Ed Services meeting. Consult the website for meeting dates.

You will be required to submit original receipts for all claimed expenses.

REQUEST FOR FUNDING ASSISTANCE (Please Print)

**Funding approval is contingent upon your request for school/department/supervisor funds.
Occasional teachers do not require supervisor or school approval.**

Date of Request: _____
Name: _____ Workplace: _____

Indicate Bargaining Unit:
_____ Teachers' _____ Occasional Teachers' _____ Professional Student Services Personnel _____ Continuing Education Instructors

Home Address (please include postal code): _____

Personal email address: _____

Type of P.D. Activity: _____ Conference _____ Self Directed _____ Other
(Registration Form, Brochure or Event Information MUST accompany application)

Name of Workshop or Conference _____

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

What is your rationale for participating in this P.D activity? How does it relate to your professional development?

Have you applied for PD funds from your school/location/supervisor? _____ Yes or _____ No

Total assistance from own workplace \$ _____

Projected Costs:

Registration Costs \$ _____

Travel (mileage)

.42¢ /km individual X _____ km = \$ _____

OR .55¢ /km carpool X _____ km = \$ _____

Accommodation \$ _____

Meals \$ _____

(Daily maximums: \$10 breakfast, \$20 lunch; \$30 dinner receipts)

Other _____ (specify) \$ _____

Total Costs \$ _____

Total amount requested from OSSTF District 11: \$ _____
(Maximum \$175.00)

Applicant Signature

Prior to submitting your application, be sure the following are attached (included):

- Registration form, brochure or event information
- Accommodation receipts
- Meal receipts
- Other: _____