1. This form is to be used for requests from Teachers Teaching On Call for funds to participate in personal professional developm 2. Send the completed form to the NWTU office at metuadmin@club.and, Photocopy for your own record. 3. Due to limited funds, access to the TTOC Pro-D funds is on a first come, first served basis. 4. Funding will be limited to up to \$150. 5. Any TTOC with a part-time contract will be ineligible to access this fund. 6. All funding applications must be into the NWTU office by May 31 st of the school year in which the professional development event occurs. A. Name:	OTH	T Coroco	eacher Teach	ning on Call Professional Develop	ment Fund	
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C. EXPENSES: a) Resources for personal pro-d: receipts and itemized list required \$	B.	Торіс:				
a) Resources for personal pro-d: receipts and itemized list required \$		Place:		Date(s) of activity:	Date(s) of activity:	
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b) Registration Fee: invoice/registration form for a 3rd party cheque i::::::::::::::::::::::::::::::::::::	a) Res	sources for personal pro-d:	receipts and iten	nized list required	\$	
 hotel at cost, receipts required,	b) Re	gistration Fee: invoice/regi	stration form for	r a 3rd party cheque	\$	
 with friends or relatives claim \$25 per night Gift in lieu of hotel accommodation coveringnights \$	c) Ac	commodation:				
Gift in lieu of hotel accommodation coveringnights \$					\$	
(Allowances based on most current BCTF Members' Guide) Allowance: breakfast \$20 xday(s) = \$					\$	
lunch \$25 xday(s) = \$ dinner \$40 xday(s) = \$ e) Transportation: (i) &(ii) invoice for a 3rd party cheque / receipt for personal reimbursement (i) &(ii) invoice for a 3rd party cheque / receipt for personal reimbursement \$						
dinner \$40 xday(s) = \$\$ \$		Allowance:	breakfast	$20 x_{day(s)} = $		
e) Transportation: (i) &(ii) invoice for a 3rd party cheque / receipt for personal reimbursement (i) public transportation at cost \$				$25 x_{day(s)} = $		
 (i) &(ii) invoice for a 3rd party cheque / receipt for personal reimbursement (i) public transportation at cost airtrainbustaxilimousineferry (ii) parking at cost (iii) mileage rate:km @ 68 cents (iv) bicycling rate:km @ 26 cents B. CHEQUE(S) PAYABLE TO	a) Tra	nonortation	dinner	$40 x_{day(s)} = 5_{day(s)}$	\$	
(i) public transportation at cost \$	e) Ira	insportation:				
air train bus taxi limousine ferry (ii) parking at cost (iii) mileage rate: km @ 68 cents (iv) bicycling rate: km @ 26 cents B. CHEQUE(S) PAYABLE TO C. TOTAL AMOUNT OF THIS CLAIM S	(i) &	(ii) invoice for a 3rd party	cheque / receipt	for personal reimbursement		
(ii) parking at cost \$					\$	
(iii) mileage rate:km @ 68 cents \$ (iv) bicycling rate:km @ 26 cents \$ B. CHEQUE(S) PAYABLE TO C. TOTAL AMOUNT OF THIS CLAIM D. I acknowledge that the expenditures claimed on this form is entirely for PROFESSIONAL DEVELOPMENT (e.g.: NOT learning resources that will be used in the classroom) and that the information is complete, accurate and all receipts are attached. Applicant's signature:(date)					\$	
 B. CHEQUE(S) PAYABLE TO		(iii) mileage ra	te:km	@ 68 cents	\$	
 C. TOTAL AMOUNT OF THIS CLAIM \$		(iv) bicycling	rate:k	m (a) 26 cents	\$	
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(e.g.: NOT learning resources that will be used in the classroom) and that the information is complete, accurate and all receipts are attached. Applicant's signature:	C.	TOTAL AMOUNT OF	THIS CLAIM		\$	
	D.					
Authorizer signature:(date)		Applicant's signature:			(date)	
		Authorizer signature:			(date)	

New Westminster Teachers' Union

Revised October 2023