

# PRO-D FUNDING APPLICATION FORM

FORM # \_\_\_\_\_

## NWTU, District #40

Refer to previously submitted FORM # \_\_\_\_\_

Last revision Feb. 2022

1. This form is to be used for all requests for funds for teachers to participate in personal professional development initiated by the individual or their department. If you require a TTOC, please complete a TTOC request form
2. FORWARD THE ENTIRE FORM TO THE PRO-D BOX WHEN YOU HAVE COMPLETED ALL OF SECTIONS A-H. Photocopy for your own record.
3. Applications that require additional information, documentation, receipts or reference to previously submitted forms may require more time to process and may not be done by the end of the same month.

A. NAME: \_\_\_\_\_ Dept: \_\_\_\_\_ F.T.E. \_\_\_\_\_

B. Topic: \_\_\_\_\_

Place: \_\_\_\_\_ Date(s) of activity: \_\_\_\_\_

C. Funding Area: \_\_\_\_\_ Individual Pro-D Funds  
 \_\_\_\_\_ Department Pro-D Fund  
 \_\_\_\_\_ School General Pro-D Funds

D. EXPENSES:

a) Resources for personal pro-d: receipts and itemized list required \$ \_\_\_\_\_

b) Registration Fee: invoice/registration form for a 3rd party cheque receipt are required for a personal reimbursement \$ \_\_\_\_\_

c) Accommodation: \_\_\_\_\_  
 - hotel at cost, receipts required, \$ \_\_\_\_\_  
 - with friends or relatives claim \$25 per night  
 Gift in lieu of hotel accommodation covering \_\_\_\_\_ nights \$ \_\_\_\_\_

d) Meals including gratuities: claim allowance or submit receipts. (Allowances based on most current BCTF Members' Guide)

Allowance:	breakfast	\$16 x _____ day(s) =	\$ _____
	lunch	\$18 x _____ day(s) =	\$ _____
	dinner	\$29 x _____ day(s) =	\$ _____

e) Transportation:

(i)&(ii) invoice for a 3rd party cheque / receipt for personal reimbursement

(i) public transportation at cost \$ \_\_\_\_\_  
 \_\_\_ air \_\_\_ train \_\_\_ bus \_\_\_ taxi \_\_\_ limousine \_\_\_ ferry

(ii) parking at cost \$ \_\_\_\_\_

(iii) mileage rate: \_\_\_\_\_ km @ 54 cents \$ \_\_\_\_\_

(iv) bicycling rate: \_\_\_\_\_ km @ 26 cents \$ \_\_\_\_\_

E. CHEQUE(S) PAYABLE TO \_\_\_\_\_

F. TOTAL AMOUNT OF THIS CLAIM \$ \_\_\_\_\_

G. 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) \_\_\_\_\_

H. Acknowledgement: obtain these signatures, then submit to the Pro-D box.

NWSS: Dept Head \_\_\_\_\_ (date) \_\_\_\_\_

(To be co-signed by a dept member when a dept head withdraws dept funds)

Other Schools: PD Treasurer \_\_\_\_\_ (date) \_\_\_\_\_

(To be co-signed by a dept member when a dept head withdraws dept funds)

(PRO-D COMMITTEE USE ONLY)

Processed: \_\_\_\_\_

Cheque(s) issued: # \_\_\_\_\_

\$ \_\_\_\_\_

Transfer of Funds Form # \_\_\_\_\_

Applicant's Account balance \$ \_\_\_\_\_

Department Account Balance \$ \_\_\_\_\_