## South Shore Regional Professional Development Fund Application Form – Educational Leave of One Year

Completed applications must be received at Regional Office by 4:30 PM on February 14th

Name				Professional Number	
Name				Professional Number	
Primary Work Location		Contract S	tatus	PERMANENT	
Current Assignment		Email Add	ress		
Power of Land					
Purpose of Leave				Years Employed by SSRSB	
Please review the guidelines and rubric for Educational Leaves of One Year prior to submitting your application. Please consult monthly application deadlines and meeting dates in the Guidelines booklet, as late applications will not be accepted by the Committee.  Previous Educational Leaves (Within the last 5 years)					
School Year	Number of Days in Leave		Purpose	Purpose of Leave	
This form must be a ccompanied by a clea r and detailed outline of the pro posed Edu cational Leave and a clear and detailed explanation of how the proposal meets one or more of the program priorities established by the School Board and any additional criteria established by the Committee					
Applicant`s Signature	Dat	е			
Approval					
Supervisor's Signature		Supports Application		Date	
		Yes	□ No		
(If the Supervisor does not support the application, please attach a letter explaining why not.)					
Director of HR's Signature	Ap	oroved		Date	
		Yes	□ No		
The Director of HR's signature approves the teacher to be away from his/her assignment only. Reimbursement of any costs associated with the leave must be approved by the Professional Development Committee.					
PD Committee Co-Chair's Signature	Ap	oroved		Date	
_		Yes	□ No		

August 2013