Please forward your completed application to the PD Committee through school mail or by fax (902-541-3049).

South Shore Regional NSTU Article 60 Professional Development Fund Application Form – Teacher Initiated In-Service

Please review the guidelines for Teacher or School Staff Initiated In-Services prior to submitting your application. Please consult monthly application deadlines and meeting dates in the guidelines of the PD Committee on the Regional Centre's website, as late applications will not be accepted by the Committee. (Members may access Teacher Initiated In-Services once per school year.)

This form must be accompanied by	by a clear and detailed	outline				
Name			Professional Number			
Civic Address						
Primary Work Location			Contract Status: Permanent, Probationary, or Term. Long- Term Substitutes are not eligible.			
Current Assignment			Work Related Email Address			
In-Service Theme/Name			Anticipated # of Teachers		Anticipated # of Substitutes Required	
In-Service Dates			In-Service Location			
Other Schools Participating						
Expenses	Anticipated Costs	Anticipated Costs		Notes		
Presenter's Honorarium or Gifts	\$	\$		Either an honorarium or gift can be claimed		
Presenter's Travel	km	km \$		\$0.4585 per km or actual expenses for other modes of travel		
Presenter's Meals	\$	\$		Maximum \$45 per day (Breakfast \$10, Lunch \$15, Dinner \$20)		
Presenter's Lodging	\$	\$			Maximum \$150 per night	
Nutrition Break	\$	\$			\$3/attendee/day (when more than 1 school is participating)	
Other allowed expenses	\$	\$			Please attach a separate outline of anticipated expenses	
Total Costs	\$	\$			Guideline expense limit of \$1000.00 (Additional funding of \$25 per teacher in excess of 20 attending the in-service.)	
Substitute Days for Organizers		days				
Applicant`s Signature		Date				
Supervisor's Signature		Suppo	Supports Application		Date	
		☐ Ye	☐ Yes ☐ No			
Approval						
Regional Executive Director's Signature			Approved □ Yes □ No		Date	
The Regional Executive Director's signature with the leave must be approved by the Profe		way from			 imbursement of any costs associated	
PD Committee Co-Chair's Signature		Appro	ved		Date	
		☐ Ye				