

Forward your application to the PD Committee through school mail, by email (nstupdcomm@ssrce.ca) or by fax (902-541-3049).

South Shore Regional NSTU Article 60 Professional Development Fund Application Form - Conference Grant Outside the Maritime Provinces

Please review the guidelines for Conference Grants Outside the Maritime Provinces 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.**

| | | |
|--|---|---------------------------------|
| 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 | |
| Conference Name | | Substitute Days Required |
| Conference Dates | Conference Location | |
| Conference Web Site - If there is no conference website, please attach a copy of the conference agenda. | | |

| | | |
|--|----|-----------------|
| Distance from home to school (one way) | km | (a) |
| Distance from home to conference (one way) | km | (b) |
| Claimable distance (one way) | km | (c) = (b) – (a) |
| Claimable distance (round trip) | km | (d) = 2 × (c) |

| Expenses | Anticipated Costs | Notes |
|--------------------------------------|-------------------|--|
| Registration Fee(s) | \$ | Excluding membership fees |
| Travel by Car | km \$ | \$0.4615 per km (for claimable distance see above) |
| Other Travel | \$ | |
| Transportation Tolls | \$ | |
| Meals (not included in registration) | \$ | Maximum \$45 per day (Breakfast \$10, Lunch \$15, Dinner \$20) |
| Lodging | \$ | Maximum \$225 per night |
| Parking | \$ | Maximum \$40 per day |
| Total Costs | \$ | Maximum \$2000 can be claimed every 2 school years |

| | |
|------------------------------|-------------|
| Applicant's Signature | Date |
|------------------------------|-------------|

| | | |
|-------------------------------|---|-------------|
| Supervisor's Signature | Supports Application <input type="checkbox"/> Yes <input type="checkbox"/> No | Date |
|-------------------------------|---|-------------|

Approval

| | | |
|--|---|-------------|
| Regional Executive Director's Signature | Approved <input type="checkbox"/> Yes <input type="checkbox"/> No | Date |
|--|---|-------------|

The Regional Executive Director'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 | Approved <input type="checkbox"/> Yes <input type="checkbox"/> No | Date |
|--|---|-------------|