



**Funding Formula: Maximum PD funding available per fiscal year= \$1000.00.**

Funding requests up to \$500 can receive 100 percent funding after meeting all other application criteria. In cases where the funding application exceeds \$500, the balance of funds requested *after deductions are made for departmental or other sources of support* receive the \$500 plus 80 percent of the difference. The employee is responsible for the balance.

*Example:*

Total cost of PD activity	\$1400
Department/Supervisor contribution (arbitrary & hypothetical)	<u>\$ -250</u>
Total application to PD Committee	\$1150
First \$500 @ 100%	<u>\$ -500</u>
Balance	\$ 600
80% PD funding to a maximum of \$700	<u>\$ -520</u>
Department and or/Employee Contribution	\$ 80
Not exceeding a maximum total of \$1000.00	

**Application Procedures**

1. The exempt staff member completes a Professional Development Funding Application form (available from the Human Resources office or the Executive Assistant Board/President's Secretary) and, if necessary, a copy of the Travel Advance Request form filled out in triplicate.
2. The staff member sends the completed forms to his/her supervisor for approval along with the relevant supporting documents. Departmental support for the activity must be indicated at this time.
3. If the activity is approved and totally funded by the department supervisor, forward travel advance request to Finance for processing.
4. If additional PD funds are required, forward the application with the required signed departmental recommendation at least 30 days prior to the activity to the Chairman of the Exempt Staff Professional Development Committee. Unless applications are received at least 30 days prior to the activity, funding cannot be expected prior to the event. A retroactive application will be considered ***if received within 15 days of the activity undertaken.***
5. The Committee will convene the last Friday of each month to consider applications. Time and place to be determined by the committee. *Incomplete applications will be returned to the applicant for completion and re-submission.*
6. The staff member must submit a written report of the activity to the PD Committee Chairman within 60 days of completion of the activity. ***Failure to file an activity report renders that member ineligible for PD assistance for the next fiscal year.*** A completed expense report and all required receipts should be cleared through Finance.

# Professional Development Funds Application For Exempt Staff

Name \_\_\_\_\_ Department \_\_\_\_\_

**Procedure:**

On a separate sheet, please provide the following:

1. A description of the PD activity or expenditure. If applicable, include an agenda or outline of the workshop, course, conference or seminar, showing the sessions to be attended.
  2. An explanation of how the activity or expenditure will assist you to remain current in your job and/or will benefit the College.
- If appropriate, fill out and sign the Travel Advance Request/Expense Report or a journal voucher form, cheque requisition, etc.
  - Submit application and forms to your supervisor for indication of department support, recommendation and signature, then forward all documentation to the Exempt Staff PD Committee Chairman.
  - Allow one month for processing.
  - After completing the PD activity - submit original receipts, with the pink copy as indicated on the Travel Advance Request Form to the PD Committee Chairman.
  - Return PD Report form to the PD Committee **within 10 days** of return.

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Have you received PD funds this Fiscal Year? Yes ( ) No ( )

How much money did you or will you receive? \$ \_\_\_\_\_

List PD activities in which you have participated in the past six months.

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**TO BE COMPLETED BY SUPERVISOR**

Check one in each category

RECOMMENDED

NOT RECOMMENDED

Department Funding  Yes. Amount \$\_\_\_\_\_

Amount Code ( ) ( ) - ( ) ( ) ( ) ( ) ( ) - ( ) ( ) ( ) ( )

No

COMMENTS:

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Supervisor Signature\_\_\_\_\_ Date\_\_\_\_\_

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**P.D. Committee Use Only**

APPROVED

NOT APPROVED

TOTAL GRANT APPROVED \$\_\_\_\_\_

PD Reports received  Date\_\_\_\_\_