



# Education Professionals Request for Professional Development Funds 2017-2018

Please forward your completed form (once signed by your Director) to: I. Spencer, Riverdale High School, 5060 des Sources, Pierrefonds, Qc, H8Y 3E4 (through internal mail)

**Name:** \_\_\_\_\_ **School/Dept.:** \_\_\_\_\_

**Title of Conference:** \_\_\_\_\_ **Date(s):** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Aims and Purpose:** \_\_\_\_\_

\_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_

**Conferences attended this school year:** \_\_\_\_\_

**Conferences attended last school year:** \_\_\_\_\_

### Estimated Expenses (Canadian Funds Only)

Registration fee:	\$	_____
Travel Air/Rail:	\$	_____
Travel Other:	\$	_____
Accommodations:	\$	_____
Meals:	\$	_____
Other (specify):	\$	_____
<b>TOTAL:</b>	<b>\$</b>	_____

Approvals: \_\_\_\_\_

Director

\_\_\_\_\_

Date

\_\_\_\_\_

PD Committee Chairperson

\_\_\_\_\_

Date

\_\_\_\_\_

PD Coordinator

\_\_\_\_\_

Date