



Form A
THE ONTARIO ENGLISH CATHOLIC TEACHERS' ASSOCIATION
ALGONQUIN-LAKESHORE UNIT
PROFESSIONAL DEVELOPMENT FUNDING REQUEST FORM

*OECTA will reimburse \$150 per person per school year towards a professional development course, conference, workshop or book. For OECTA sponsored courses and workshops, OECTA will cover up to 50% of the total fee. If you have already accessed the PD funding in the year, for OECTA sponsored courses, OECTA will cover 50% minus \$150. Receipts **MUST** be submitted to be reimbursed. Religious Education AQ in Italy travel expenses are **NOT** eligible for reimbursement*

Name: _____ **Email:** _____

School: _____

Date of Application: _____

Please check what you are applying for:

- Conference/Workshop/Course:** _____
- Professional Development Book** _____
- OECTA Sponsored Workshop/Course** _____

Location: _____

Date: _____ **Estimated Expenses:** _____

If you anticipate receiving funds from other sources please list the amount:

School P.D. Budget _____ **Board P.D. Budget** _____

Professional Growth Fund _____ **Other** _____

Requests are to be forwarded to the P.D. Committee Co-chair listed below

Date Received: _____ **Maximum Approved Expenses:** _____

Signature of P.D. Committee Co-chair _____

FOR REIMBURSEMENT: PLEASE FORWARD **RECEIPT & Form B** WITHIN 30 DAYS OF CONFERENCE ATTENDANCE OR COMPLETION OF COURSE. PLEASE NOTE: FOR PROFESSIONAL DEVELOPMENT BOOK NO FORM B IS REQUIRED. ALL REQUESTS ARE SUBJECT TO FUND AVAILABILITY.

For approval, a copy of this form is to be forwarded to:

East – Lori McCaw – Board Office, Napanee

lori.mccaw@aloecta.com

West - Cyndi Kelly – St. Mary School, Trenton

cyndi.kelly@aloecta.com



Form B
THE ONTARIO ENGLISH CATHOLIC TEACHERS' ASSOCIATION
ALGONQUIN-LAKESHORE UNIT
PROFESSIONAL DEVELOPMENT COMMITTEE
CONFERENCE/WORKSHOP/COURSE SUMMARY FORM

Name: _____ Email: _____

School: _____

Home Address: _____

Conference/Workshop/Course: _____

OECTA sponsored?

- Yes
- No

Location: _____ Date: _____

1. Brief Summary of the Professional Development Experience:

2. Yes, I have attached my official receipt(s)

3. FINAL APPROVED EXPENSES: _____

Signature: _____ Date: _____

**PLEASE FORWARD WITHIN 30 DAYS OF CONFERENCE ATTENDANCE OR
COMPLETION OF COURSE IN ORDER TO BE REIMBURSED.**

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cyndi.kelly@aloecta.com