

**TEACHER DEVELOPMENT FUND  
GROUP FUNDING  
APPLICATION FORM  
2022-2023 SCHOOL YEAR**

**TO BE COMPLETED AND SUBMITTED BY THE REPRESENTATIVE FOR THE GROUP WHO WILL BE SUBMITTING THE EXPENSE CLAIM**

<b>Surname</b> (Please print)	<b>Given Names</b> (in full) underline name used	<b>Status</b> <input type="checkbox"/> Contract Teacher <input type="checkbox"/> Active Substitute Teacher
<b>School/DU</b>	<b>DU Administrator/Principal Name</b>	
<b>Email Address</b> (The group leader will be notified by email once the application has been processed.)		<b>Alternate Contact Number</b>
<b>Name of Activity</b>	<b>Date(s) of Activity</b>	<b>Location of Activity</b>

**Type of Activity/Resource** (Attach details as outlined in the Teacher Development Fund Guidelines)

<input type="checkbox"/> Course	<input type="checkbox"/> Online Course	<input type="checkbox"/> Collaboration
<input type="checkbox"/> Workshop	<input type="checkbox"/> Book	<input type="checkbox"/> Practical Research
<input type="checkbox"/> Conference	<input type="checkbox"/> Interschool Visitation	<input type="checkbox"/> Other (please specify) _____

**Names of Group Activity Participants**

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**Has funding been provided by another source? If so, please provide:** \_\_\_\_\_

**1. Eligible Expenses**

a. <b>Conference or Activity Fee/Course Fee/Resource Cost</b> (excludes membership fee)	\$ _____
b. <b>Travel</b> (\$.505/km)	\$ _____
c. <b>Taxi/Airport Shuttle/Bus/Parking</b>	\$ _____
d. <b>Hotel Accommodation</b>	\$ _____
e. <b>Meals per diem</b> without receipts = \$47 CAD	\$ _____

Breakfast (\$10.00) Date(s): \_\_\_\_\_  
 Lunch (\$13.50) Date(s): \_\_\_\_\_  
 Dinner (\$23.50) Date(s): \_\_\_\_\_

**Subtotal** \$ \_\_\_\_\_

**2. Substitute Teacher Costs** (Complete if support is requested through the Teacher Development Fund)

Date(s): \_\_\_\_\_

Identify the source of funding:

<input type="checkbox"/> DU/school to pay costs (principal/supervisor authorized) – \$226.27 for full day, \$137.01 for half day	
<input type="checkbox"/> Teacher Development Fund (principal/supervisor authorized) – \$226.27 for full day, \$137.01 for half day *Division reimbursed by the TDF	
<input type="checkbox"/> Private Business Leave at the substitute teacher rate of pay – \$226.27 for full day, \$137.01 for half day – requires an application to Leaves of Absence, *Teacher reimbursed by the TDF	
<input type="checkbox"/> Personal Leave Unpaid – requires an application to Leaves of Absence	<b>Subtotal</b> \$ _____

Substitute Teacher Costs requested through the Teacher Development Fund (All claims for substitute teacher costs will be subject to verification with Edmonton Public Schools) \$ \_\_\_\_\_

**3. Total Projected Eligible Personal Expenses That Will Not Be Covered By Other Sources/Amount Request** (see Teacher Development Fund Guidelines) **TOTAL** \$ \_\_\_\_\_

I confirm that I have not accessed other sources of funding for the above expenses. I understand that my application will not be considered until all required documentation is received and complete. I acknowledge that we are eligible to a maximum of \$1,300 per group member to a total maximum of \$6,500 per group.

\_\_\_\_\_  
**Signature of Group Representative** \_\_\_\_\_  
**Date**

The personal information collected on this form will be used and disclosed solely for the purpose of processing this application and is collected under the authority of The School Act and Alberta's Freedom of Information and Protection of Privacy Act for the purpose(s) noted above. If you have any questions about this application, please call 780-455-2164.

Submit to: ATA, LOCAL 37 401, 11010 - 142 Street Edmonton, AB T5N 2R1 Phone: 780-455-2164 Fax: 780-453-1407 Email: <a href="mailto:tdf@edpub.org">tdf@edpub.org</a>	This section is to be completed by the Teacher Development Fund Administrator. Funding is: <input type="checkbox"/> approved <input type="checkbox"/> not approved \$ _____	
	_____ Signature of Teacher Development Fund Administrator	_____ Date

