

## APPLICATION FOR FUNDING - INDIVIDUAL JOB SHADOWING AND IN-SERVICE

(Revised Jan. 2024)

Email Completed Form to [office@d26.osstf.ca](mailto:office@d26.osstf.ca)

Incomplete applications **cannot** be processed.

NAME (print): \_\_\_\_\_ SCHOOL: \_\_\_\_\_

Contact e-mail address: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

School Telephone: \_\_\_\_\_

Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **ACTIVITY DETAILS**

**Type of Activity:** (not school/subject/department meetings)

\_\_\_ Job Shadowing – UCDSB Location    \_\_\_ Job Shadowing – non UCDSB Location    \_\_\_ Non UCDSB In-Service

**Location of Activity:** \_\_\_\_\_ **Date of Activity:** \_\_\_\_\_

**Purpose of Activity:** (please include any reference material information)

### **FUNDING REQUEST**

1. **EXPENSES:** *Estimate unknown costs*

Total reimbursement will not exceed \$250.00 (*plus Occasional Teacher costs*)

Travel (lesser of 0.64/km or train/plane fare): \_\_\_\_\_ km \$ \_\_\_\_\_

Child Care: (\$25 daily; max 2 days) \$ \_\_\_\_\_ Food (\$50 daily; max 2 days): \$ \_\_\_\_\_

2. **RELEASE TIME** (normally required to be away): (*max 1 day*) One Day \_\_\_\_\_ Half Day \_\_\_\_\_ None \_\_\_\_\_

3. **OCCASIONALTEACHER REQUIRED:** (*max 1 day*) One Day \_\_\_\_\_ Half Day \_\_\_\_\_ None \_\_\_\_\_

Indicate ***Occasional Teacher required*** only if the applicant is to be released from **classroom duties**. The school will be reimbursed by the SPDF for approved OT costs.

**EXPENSE CLAIM** Following your event, submit **SPDF Expense Claim Form**. Original receipts are required for all expenses except mileage

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