Fill out completely

Local No. 60 PD Fund REIMBURSEMENT FORM

See Guidelines on Reverse



Name:		School:		1918
Conference/event name:				
Location (city):				
Depart date:	& time:	Return date:	& time:	_
Substitute costs mus	t be paid before other expenses	s if needed and requested from PD	F fund.	
Did you request a sub	ostitute be paid by your PD Loca	al No. 60 allocation money?	<u>Y / N</u>	
Date(s) substitute req	uired:			
Vehicle:	km x \$.54/km =	:		\$
Air/bus fare:	(receipt required)			\$
Accommodation: (Private accommodation max. is \$30/day, otherwise attach hotel receipt)				\$
Meals: (Meal max	x. is \$20/meal, otherwise attach	receipts)		
Taxi/Shuttle Bus/Parking (above \$10 requires receipt)			\$	
Incidentals: days @ \$7 per day (no receipt required)			\$	
Registration Fee (receipt required)				\$
Other: (provide details and receipts required))	\$
		Total 'out	of-pocket' expenses =	\$
Cost of Substitute:				This box is onlyused if
Absent 2 days or less: \$219 per day or \$124 per ½ day				yourLocal-PDF moniespay for your sub costs:
	Absent 3 consecutive days or more: \$375 per day and \$188 per ½ day			\$
		Please read and initial each sta	<u>atement</u>	
I hereby certify that	t the amounts claimed have not pr	reviously been reimbursed to me district level PD events (including reti	roats)	
I hereby certify that	t these expenses were incurred on	ATA Red Deer City Local No. 60 "PD	" business only	
1 nereby certify that	t inis projessionai aevelopmeni aci	tivity is part of my ongoing individual	Projessionai Growin Pia.	n
				Your (Claimant) Signature
		Committee Appro	oval:	
		Ideally- prior appr		ool PD Chair
			2ndP	D School Representative

(Workplace PD Ctte. consists of one CSR member and two other ATA members (not necessarily an administrator) – as per ATA Local No. 60 policy.)

Before you register for PD or submit this form, please ensure that you inform your principal about any intended PD in terms of what you will be attending and which days you will be absent. If you are applying to use your Personal Days as per Clause 11.1, please inform Human Resources and submit your absence request prior to submitting this form.

Local No. 60 PD Fund Reimbursement Form Information

Please be advised that you cannot use your RDPSD District Credit Card for any purchases related to Clause 14 PD claims. All costs must be incurred personally before being reimbursed by the PD Fund.

Complete form fully to avoid delays:

Date <u>and</u> time you left home or work and returned. Date(s) a substitute teacher was required.

To access information regarding your PDF balance, contact Barb Mehlhorn: pdf.local60@gmail.com

Foreign Funds: All items paid in foreign funds must include the exchange rate for the day of the expense. (i.e. Credit

cards or cheque payments to register at a foreign conference must include the exchange rate paid the

day the item was processed.)

Private Vehicle (km) Rate is \$0.54/km – No receipt (see RDPSD list for destination-to-destination kilometre values.

Distance is from Red Deer, not a home address.)

Destinations not on list can be determined using 'Google map' result plus add 5% to total.

Air/Bus Receipt required andmust show price of fare andapplicable taxes.

Accommodation Private accommodation (no receipts required). Maximum is \$30 per 24 hrs.

Hotel receipts <u>must</u> be attached and show a **\$0** balance. Only room and applicable taxes will be reimbursed.

Meals (including tips)

To a maximum of \$20 per meal without receipt.

All items above \$20 require a receipt.

Other Expenses

Parking No maximum. Receipt required.

Registration Fee Receipt required. Only include this amount if you *personally* are requiring reimbursement. Do

NOT include registration amounts paid through District Purchasing Card or District cheque.

Taxi To a maximum of \$10 without receipt.

All items above \$10 require a receipt.

Shuttle Service Receipt required.

Incidentals Maximum \$7 per 24 hour period of travel. **No receipt required.**

Phone Calls Personal long distance or local call. **Receipts required.**

Airport Imp. Fee Receipt required.

Signature/Date Please sign and date your claim. Obtain two signatures from your school-based PD ctte. Prior

approval and sufficient funds assures you of reimbursement.

Mailing Instructions:

Send ORIGINAL receipts to the PDF coordinator. Make copies for your records. Use internal school system mail:"Local No. 60 PDF Coordinator—Central Services"

NOTE: These Guidelines apply to any member of ATA Red Deer City Local No. 60 who is submitting a PD Fund claim to the PD Fund Coordinator for reimbursement.

If your claim is challenged or denied, please feel free to appeal to the board of ATA Local No. 60 Table Officers for consideration. This can be done by contacting Nathan Good or Kelly Aleman.