Date of Application:



CUPE PG FUNDING APPLICATION

bate of Application:			
Name:			
School or Facility:	Job Title:		
Work Phone:	Home Phone:		
Name of Conference/Workshop:			
Date of Conference/Workshop:			
City of Conference/Workshop:			
Description of Conference (Attached Conference Brochure):			

For pre-approval, an application form (Form 443-01) shall be submitted to the CUPE Chair AT cupe1357pg@gypsd.ca of the CUPE Professional Growth Committee a minimum of 10 working days prior to the leave, unless a deadline is specified by the committee.

Applications received less than 10 working days, will be considered, but notification of application status may not occur prior to the convention sessions, conference, seminar or workshop.

CUPE PG FUNDING APPLICATION FORM

<u> </u>	I E I O I GIVDIIVO AI I EIOA	THOIT OITIN		
	Rates/Maximums	Projected Expenses (Employee to Complete) Not to exceed Maximums		
All inclusive Conference Fee see AP 443	(includes conference; and/or meals; and/or accommodations)	\$		
	OR the maximum unde	· ·		
Conference Fee *	\$200.00 max	\$		
Accommodation *	\$150.00/night, 3 nights	\$		
Private Accommodation (no receipt required)	\$30.00/night, 3 nights	\$		
Meals	B - \$ 10 X =	\$		
	L - \$ 14 X = S -	\$		
	\$ 22 X =	\$ Total \$		
Alternative Transportation *		Τοιαι φ		
Parking		\$		
		Sub-		
		Total \$		
* Receipts required for Conference	e Fees, Accommodations, Parking an	d Alternative Trans	sportation only.	
Mileage			Kilometres	
	eage paid at the GYPSD Rate to a \$625	a maximum	Rate (Estimate)	
010	·	lication \$		
Allowable mileage is calcula Car-pooling is encouraged Cost of alternative transport	ohp/downloads/maps/doc_download/503-gated on a single return trip from regular wor	rkplace to the Confer	ence site.	
	443-3) within 30 calendar days of c Professional Growth Comm	onference to CUP		
Conference funding shall be for a maximum of three days.				
A CUPE support staff member wh Professional Growth Committee.	o is unable to attend an approved cor	nference shall imme	ediately notify the CUPE	
Signature of Applicant		Signature of Principal/Department Head		
Date Received by Committee Cha	air	Signature of Com	mittee Chair	
Distribution: Chair PG Fund Co	ommittee			