



HUMAN RESOURCES - MEMO

TO: CMAW EMPLOYEES
FROM: RENGE BAILIE - ASSISTANT SUPERINTENDENT
SUBJECT: SUPPORT STAFF PROFESSIONAL DEVELOPMENT FUNDS
DATE: OCTOBER 27, 2023
CC: CMAW EXECUTIVE, PAYROLL, ADMIN & MANAGEMENT

Re: Policy #6610 Professional Development

Each year, CMAW staff can access professional development funds in the amount of \$450/per school year.

Attached is the form that needs to be completed prior to registering for professional development courses. Once your supervisor has preapproved you, you can go ahead and register and pay for the course you have selected. Once you have completed the course, you can submit your receipts and the pre-approval form to Human Resources Department for final processing. Applications that have not been preapproved may be denied.

Additionally, remember to follow the district's leave procedures for approval from your supervisor.

If you are unsure if you have a balance in your professional development funds, contact Donna Larder directly at donna.larder@sd78.bc.ca.

Please contact Human Resources should you have any questions.

Sincerely,

Renge Bailie
Assistant Superintendent

CMAW Professional Development Funds

PRE-APPROVAL & REQUEST FOR
REIMBURSEMENT

Employee Name: _____

Position: _____

Work Location: _____

Today's Date: _____

Description of Course/Class/Program: _____

Amount \$: _____

If you will be absent during work hours to attend the pro d event, please indicate the number of hours you will be missing? _____ hours.

Please attach a copy of the course information or a link to the learning opportunity:

Reasons for enrolling in the course/What is this connection to your work, and how will it support you in your role?

CMAW members must seek pre-approval for any courses/programs they are seeking reimbursement for. Approval can come from a direct supervisor (Principal/Vice Principal/Director/Manager).

Name of person providing pre-approval: _____

Signature of the person providing pre-approval: _____

Date approval provided: _____

REIMBURSEMENT REQUEST

PLEASE SEND THE COMPLETED PRE-APPROVAL SHEET, ALONG WITH RECEIPTS FOR THE COURSE AND ANY PROOF OF COMPLETION YOU ARE PROVIDED.

HUMAN RESOURCES ONLY

Human Resources: _____

Date: _____

Amount Paid at Registration by Employee: \$ _____

Amount paid for coverage if taken during the school day: _____ hours

Grade Earned: _____ Credit Earned: _____

Reimbursement to Employee: \$ _____