



APPLICATION FOR COURSE FEES – SUPPORT STAFF

(For external courses and seminars)

Applications must be submitted to your supervisor at least one (1) month prior to the course start date

EMPLOYEE INFORMATION			
LAST NAME	FIRST NAME		
SCHOOL/LOCATION			
POSITION			
BENEFITS OF COURSE, CONFERENCE OR SEMINAR			
Please describe the benefits of this course/conference/seminar and indicate the relevance to improving for you and Frontier School Division.			
COURSE / SEMINAR INFORMATION (COURSE DESCRIPTION MUST BE ATTACHED)			
<i>Please ensure Diploma or Certificate courses are being provided by a recognized accredited institution.</i>			
COURSE OR SEMINAR NAME			
START DATE	END DATE		
PROGRAM/CERTIFICATE NAME			
INSTITUTION NAME			
EMPLOYEE ACKNOWLEDGEMENT			
I hereby request reimbursement through the Frontier School Division Professional Learning Program and agree to all conditions of the Professional Learning Policy (E.4.D). I understand that if my employment ceases with the Division or if I am unsuccessful in completing the course, I may be required to repay Frontier School Division for part/all course expenses. I authorize Frontier School Division to make deductions of this type from my pay. I further acknowledge that I may claim the portion of tuition expenses for which I actually paid for Income Tax purposes.			
EMPLOYEE SIGNATURE:		DATE:	
PRINCIPAL/SUPERVISOR SIGNATURE: <input type="checkbox"/> Supports Request <input type="checkbox"/> Does Not Support Request		DATE:	
SUPERINTENDENT SIGNATURE:		DATE:	

Submit completed form to the Human Resources Department via Fax – 204-258-2068

When the course is finished, please send in confirmation of the cost of tuition and proof of successful completion of the course. The Division will reimburse the applicable amount in a one lump sum payment.