



Delta Teachers' Association

Form 5070TTOC

Professional Development Application

110—4977 Trenant Street, Delta, BC V4K 2K5

Fax # 604-946-1629 Phone # 604-946-0391 email: marilyn@deltateachers.org

Request for Additional TTOC Days

Date of Application: _____

DTA Use Only	Date Rec'd	Number

Name: _____

School: _____

Email: _____

Conference title: _____

Sponsored by: _____

Location: _____

Dates: _____

POLICY:

1. Any dues-paying member may apply for up to 1 additional release day (September—June) **once** per budget year.
2. Approvals done on a first come, first serve basis. 6 days per month (September—June) will be available.
3. Approval shall not affect the members' available **regular** PD funding amount for the year.
4. To cover release time for attending workshops & events which do not fall on PD days. *Separate from/and does not replace Self-Directed fund (form 5160).*
5. Applications must be received by the DTA office 14 days in advance of event.

TTOC Day Requested:

TTOC day 1 @ \$ _____ day

Date requested: _____

Principal/VP Signature: _____

Pro-D Contact Signature: _____

DTA Use Only

Funding not Granted or Modified

Reason: Late, Limit reached

Funding Approved:

Pro-D Chair's Signature: _____

TTOC days 1 @ _____/day = \$ _____

Accounting Purposes Only (DTA Use) Date _____ Chq # _____ Amount _____