**OSTU Pro D Presenter Application**

2025/2026 School Year
*Please scan & e-mail as a single document (Word/PDF) to* *pd67@bctf.ca* *or*

*drop-off claim package at the OSTU office (697 Martin St.)*

The Professional Development Committee recognizes that learning from our colleagues is a powerful learning tool. We would like to offer reimbursement to OSTU members who plan and present a workshop on a Professional Development Day. Reimbursement can include; food costs, resources, and/or materials that were bought to support your workshop.

The following criteria must be met to qualify for reimbursement:

* application form must be received three weeks before the Pro-D Day activity *(All Pro D dates are located on the OSTU website for reference.)*
* *applications can be sent to* *pd67@bctf.ca* *or dropped off at the OSTU office mail slot*
* application must include:
	+ location of on-campus workshop site (or virtual)
	+ schedule for the workshop, including start and end times and break times
	+ a detailed outline of the presentation content (or a copy of the presentation slides, if easier)
	+ the advertisement information
* workshops must be specifically related to the field of education and curriculum based
* workshops will be open, and advertised to all OSTU members

It is understood that the presenter is responsible for their own:

* booking of workshop site through SD67
* room set-up
* photocopying and other presentation resources
* workshop registration (PD Committee can assist)

It is also understood that:

* the presenter will receive their reimbursement after the workshop has happened
* applications are awarded on a first-come, first-serve basis, until the fund is depleted
* receipts for participant’s food are required, and there is a per-person spending limit based on the total number of OSTU members attending. Coffee/snacks @ $15/person for a half-day session; OR lunch @ $25/person for a full-day session
* an attendance sheet must be attached
* all other receipts must also be attached
* teachers who already receive release time to support teachers with professional development do not qualify for this application, unless the workshop topic is unrelated to this current released role
* workshops will follow a schedule of morning session 10:00-12:00, afternoon sessions 1:00-3:00, full day sessions 9:00-3:00. If those times don’t work, please contact the Pro D Committee to confirm an alternate schedule.

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**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Presentation/Workshop Information**

Presenter Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of workshop: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Activity Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time (check the one that applies):

Morning 10:00-12:00 Afternoon 1:00-3:00 Full day 9:00-3:00

Focus Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What will registration look like? The PD Committee can assist.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of Workshop for advertising (can be sent electronically):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please attach a detailed outline of the presentation content or a copy of the presentation slides if easier.

1. **Estimated Expenses and Reimbursement**

What do you plan on being reimbursed for?

Food Expenses *(coffee/snacks @ $15/person for a half-day session; OR lunch @ $25/person for a full-day session)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resources / Material: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OSTU Pro D Presenter Application Reimbursement**

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Once you have completed the workshop, please fill out the actual amounts you would like to get reimbursed for. Please attach all receipts and an attendance sheet.

**Presenters Allocation of Reimbursement:**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Presenter’s Name Presenter’s Name**

Food Expense (refer to limits): $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resources / Material: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**All reimbursements will be e-transferred via the information you provided to the OSTU.**

If you have not yet provided your information, go to the e-transfer link on the OSTU webpage.

**Allocation of Reimbursement OSTU Office Use Only**

Total Expenses: $ \_\_\_\_\_\_\_\_\_\_\_\_\_

Total Payable: $ \_\_\_\_\_\_\_\_\_\_\_\_\_

E-transfer Fee: $ 1.25

**Billed to Pro D Account: $ \_\_\_\_\_\_\_\_\_\_\_\_\_**

Pro D Chair Initial: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_