

TEACHERS' PROFESSIONAL IMPROVEMENT COMMITTEE
Request to Attend In-Service Activity

1. Please submit this request to the Department of Human Resources after it has been signed by the designated authority and **include a copy of the programme** by email to PIC_HR@rsb.qc.ca. Applications must be received **20 working days ahead of the conference date.**

NAME: _____ SCHOOL: _____

SUBJECT TAUGHT: _____ Elementary Secondary Adult/Voc.Ed.

2. **ACTIVITY:**

Name of activity you wish to attend: _____

Dates required for attendance from: _____ to _____ inclusive.
Month / day / year Month / day / year

Duration: _____ hours. Location of Activity: _____

Substitute teacher required from: _____ to _____ inclusive.
Month / day / year Month / day / year

Reason for request: _____

3. List conferences attended in past 12 months for which PIC funds were used. NONE

4. **ESTIMATED EXPENSES:**

PLEASE NOTE: You are allowed a MAXIMUM of 2 days substitution per school year which will be covered above the \$1000 in-service activity expenses. If you request more than 2 days of substitution that amount will be deducted from your \$1000 in-service activity before all other requested expenses

Registration fee (*Membership fee not included*) \$ _____

Substitution costs \$ _____

(please provide your schedule so we may calculate accurately)

(adult ed & voc.ed \$78.71/per 60 minutes) & (youth sector \$60.04/per 60 minutes)

Amount will be calculated based on number of minutes

(total minutes of tasks as per weekly workload).

A. Out-Of-Town Conferences

Transportation \$ _____

Meals: \$12.00 Breakfast \$ _____

\$23.00 Lunch \$ _____

\$35.00 Dinner \$ _____

Hotel (\$180.00 per night if applicable) \$ _____

B. Montreal Area Conferences

\$ _____ (receipts required)

\$100 maximum per day (includes parking, food, transportation)

TOTAL: \$ _____

APPLICANT: _____ DATE: _____

DESIGNATED AUTHORITY: _____