## **Professional Development Conference Application Form**

Alberta Teachers Association – Greater Peace Local No. 13

Teacher:		School:	□HFCRD □ PRSD	
Email:		Phone:		
Home Mailing Address:				
(Street / PO Box)	(Town)	(Province)	(Postal Code)	
If PD activity is not a cou Consortium please attac		sponsored by an ATA Specialist Cou	uncil or the Northwest Learning	
Conference Name / PD A	ctivity:		·	
Location:		Date of Activity:		
Substitute Required? YE	ES / NO	Dates sub required:	(max. 2 days)	
**Please note: A half tim	ne teacher can claim	2 half days		
and other necessary receip	ned PD activity is in lii ts within one month o		I agree to submit my conference registration with this process, I will notify the treasurer as	
Teacher's Signature  Principal's Agreement:	Dat			
	ned teacher's partic	ipation in the professional developi	ment activity.	
Principal's Signature		e		
Please attach a copy of t shirene.napier@hfcrd.ab		nail to the Vice President of the Gr	eater Peace Local 13 –	
Date received by Vice President:		Signa	nature:	
Accepted: I	Rejected:	Applic	cation #:	