



STAFF DEVELOPMENT – PSS APPLICATION FORM

PLEASE READ THE STAFF DEVELOPMENT- PSS GUIDELINES AND THE INSTRUCTIONS TO APPLICANTS BEFORE COMPLETING THIS APPLICATION. ANY APPLICATION THAT IS NOT COMPLETED CORRECTLY WILL BE RETURNED. PLEASE PRINT.

SURNAME: _____ GIVEN NAMES: _____

EMPLOYEE #: _____ POSITION: _____

WORKSITE: _____ WORK PHONE _____ HOME _____

ACTIVITY: _____

ACTIVITY LOCATION & DATE: _____:

	ANTICIPATED COSTS INCLUDING TAXES & GST
METHOD OF TRAVEL _____	\$ _____
HOTEL _____	\$ _____
MEALS _____	\$ _____
REGISTRATION FEE (Not to include Memberships) _____	\$ _____
TOTAL COSTS: _____	\$ _____

DATE SUBMITTED _____ SIGNATURE _____

SIGNATURE OF SUPERVISOR _____

Please send/fax to: CBE Staff Association, Staff Development Office,
#3, 1915 - 32 Avenue NE.
Calgary, Alberta T2E 7C8
Phone: 403-242-7555 EXT.3 Fax: 403-203-1716

Can also be sent through the CBE inter-school mail