

Skills Enhancement Fund – Reimbursement of Expenses

Please complete the following in addition to your claim and submit to BCPSEA attention Candice Wright (Mailing Address: 400 – 1333 West Broadway Vancouver, BC V6H 4C1; fax to 604 730 0787 ; email – candicew@bcpsea.bc.ca).

School District No. _____

Union Local _____

Costs Associated with Training

Please complete the attached summary form and please retain any receipts or supporting documentation should any questions arise.

The parties have agreed that the Committee will reimburse direct training costs (ie. cost of trainer, materials, etc...) and any additional incremental wage and wage sensitive benefit costs associated with the training initiative. Any wage or other costs the district is already required to pay either for contractual or other reasons will not be approved.

The SSEAC money is intended to supplement, not replace, existing professional development funds.

Signed Confirmation

Both parties agree that this training and the use of funds was for skills development and/or training of support staff bargaining unit members:

Union Local Representative: _____

School District Representative: _____