



2024-2025 AQ COURSE FUNDING FORM

**Please read Professional Learning Policy prior to submitting this form
(Sidebar menu – Committees – Professional Learning)**

Complete the following form in its entirety. Incomplete forms will **not** be accepted.

All funding requests should be sent to ETFO-YR OT, **after** successful course completion.

To avoid delays in reimbursement, include both “proof of attendance” **and** “receipt of payment” along with this form. **Do not** mail documentation separately.

Mail documentation to: **ETFO-YR Office ~ Attention Catherine Sohl**
or use school courier to 30 Eric T Smith Way
Catherine Sohl ETFO-YR OT Office Aurora, Ontario
L4G 0Z6

IMPORTANT: AQ Funding requests must be submitted to ETFO-YR OT no later than 8-weeks after successful course completion in order to be eligible for funding subsidy consideration.

ETFO-YR OT Local will charge \$12.00 to issue a Stop Payment for lost cheques.

Applicant Information: Please Print.

Name	First Name	Surname
Home Address <small>(Location cheque will be mailed to)</small>		
Telephone		
Non Board Email Address		
YRDSB Employee #		

AQ Course Information: Please Print.

Name of AQ Course			
Institution Offering AQ Course <small>(Name of University or Board)</small>			
Course Start Date		Course End Date	
Course Fee			

Are you receiving funding from any other source for this AQ? NO _____ YES _____ Please Initial _____

If yes, from which Organization and how much are you receiving? _____

Supporting Documentation:

Please make sure that you have included **BOTH**. (Please check ✓)

- Proof of Successful Course Completion (i.e. final marks, letter of recommendation from instructor, letter from OCT)
- Receipt of Course Payment (i.e. receipt from institution, copy of cheque /credit card statement)

Signature of Occasional Teacher: _____ Date: _____

OFFICE USE ONLY: Rev 07/2024

** PLEASE ALLOW 4-6 WEEKS FOR PROCESSING **

Approved: YES NO	Date Cheque Issued:
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