

**ETFO RAINBOW OCCASIONAL TEACHERS LOCAL  
90 GLENBOWER CRES, BOX 493  
WAHNAPITAE, ON, POM 3C0**

**President: Bernadette Lamirande [president@etforainbowot.on.ca](mailto:president@etforainbowot.on.ca)  
1-866-440-4418 toll free 705-920-2298 or 705-694-4740  
Fax: 705-591-2122**

**Professional Learning Subsidy Application Form  
Conferences/Workshops/AQ Courses**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**Name of Event:** \_\_\_\_\_  
**Location** \_\_\_\_\_ **Dates** \_\_\_\_\_

**Expenses (submission of receipts required)**

<b>Registration/Tuition</b>	<b>\$</b> _____
<b>Travel/Mileage kmX\$0.50</b>	<b>\$</b> _____
<b>Accommodation</b>	<b>\$</b> _____
<b>Meals (\$15 breakfast, \$20 lunch, \$45 dinner)</b>	<b>\$</b> _____
<b>Child/Dependent Care (up to \$50)</b>	<b>\$</b> _____
<b>TOTAL</b>	<b>\$</b> _____
<b>Amount received from other sources</b>	<b>\$</b> _____
<b>Amount requested from Local (maximum of \$150/year)</b>	<b>\$</b> _____

**Signature of Applicant** \_\_\_\_\_

**Return completed form to Bernadette Lamirande**