

# Educational Support Professional Development Request

|                        |       |
|------------------------|-------|
| <b>Office Use Only</b> |       |
| ESPDC App:             | _____ |
| Supervisor:            | _____ |
| Funds:                 | _____ |
| Confirmation           |       |
| Sent:                  | _____ |
| Funds Sent:            | _____ |

Today's Date \_\_\_\_\_

Name: \_\_\_\_\_

School/Department: \_\_\_\_\_ Position Title: \_\_\_\_\_

Email: \_\_\_\_\_ Wk#: \_\_\_\_\_ Hm/Cell#: \_\_\_\_\_

Response will be sent to email listed above.

Course: \_\_\_\_\_ Cost: \_\_\_\_\_

Date(s): \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

How this course will help in my current position: \_\_\_\_\_

\_\_\_\_\_

\*Attached is the course information/brochure to be approved by the Educational Support Professional Development Committee.

Applicant Signature: \_\_\_\_\_

Principal/Dept Supervisor Signature: \_\_\_\_\_

No school funds are available

Partial funds are available \$\_\_\_\_\_  School Funds or  Budget code - 10 \_\_\_\_\_ 569

ESPDC Administrator/Designee Signature: \_\_\_\_\_

ESPDC Approved:  Yes  No Explanation, if denied: \_\_\_\_\_



\*Approved funds are direct deposited.

A course must have prior approval of the ESPDC to qualify for use of professional development funds.

***If you are registered for a course that is paid for by development funds, and you do not attend, you will be required to reimburse Canyons School District for all registration fees.***

Return this form with attached course information to:

Human Resources  
Attn: Kim McCluskey  
9361 South 300 East  
Sandy, UT 84070

Questions? Please call Kim McCluskey at 801.826.5452