

Archdiocese of Canberra and Goulburn Catholic Education Office

Form SD7

Application by an Individual to Attend and Professional Development Activity
(Separate application to be completed to attend each course)

NOTE: THIS FORM IS TO BE FAXED TO LOUISE STOKES, 6234 5496, FOR APPROVAL

APPLICANT'S SECTION

Name of Applicant: _____	Position: _____
School: _____	
Program Title: _____	
Dates: _____	Venue: _____

PRINCIPAL'S SECTION: REQUIRED FUNDING

Casual Relief:

Period of relief required: _____ Number of Days: _____

NB: Application for payment for casual relief should be made on Form ES41 – Professional Development.

Other Funding Required:

	To be paid by staff \$	To be paid by staff \$	To be paid by CEO \$
Travel			
Accommodation / Meals			
Program Fees / Payments			
Other			

I support this application: _____
Principal Signature
Date

PROGRAM CO-ORDINATOR'S SECTION

The applicant has been accepted to attend the above program	<input type="checkbox"/>
The applicant has been unsuccessful in obtaining a place on the program	<input type="checkbox"/>
Program Co-ordinator: _____	Date: _____

CEO Use Only:	Casual Relief: No <input type="checkbox"/> Yes <input type="checkbox"/>	Days: _____	Dates: _____
Cost Code: _____	Other Funding: _____		
Signature: _____	Date: _____		
<i>Authorised Officer</i>			