

**PURPOSE AND INTENT:**

The purpose of the fund is to support training and professional development programs and courses aimed at enhancing and refining the job-related skills of bargaining unit employees, specifically related to their current roles within the District.

**OPERATING PROCEDURES:**

- Professional Growth Fund Applications will be available on the district website: For Staff/District Forms for Staff
- The **completed application form and class/workshop description, including cost/fees**, must be submitted to the PSE President at least ten (10) working days prior to the date of the activity, including administrator/supervisor section (see application).
- Incomplete applications will be returned.
- Approval of the application will be determined by the PSE President and the Executive Director of Human Resources. If they do not agree, a committee of seven (7) PSE members, one (1) district administrator, and one (1) member of the district's Finance Department will vote by majority on the application.
- The PSE President and Executive Director of Human Resources will attempt to respond to all requests via email within three (3) working days of submission.

**CRITERIA FOR APPROVAL:**

- Must be a current, actively working member, at the time of the Workshop/Class.
- Limit of five hundred dollars (\$500) annually per person per school calendar.
- Application form(s) must be submitted no less than ten (10) working days prior to attending the workshop/seminar or class to the committee chairperson by email.
- Submission must be submitted no later than April 30 to be paid with the building P-Card or purchase order.
- Submissions submitted and approved between May 1 - June 1, for summer workshop/seminars, must be paid by the PSE member and be reimbursed after the course is completed by submitting the reimbursement form (Form #6213F1).
- Up to \$200 may be requested per year for the renewal of professional licenses or certifications related to the employee's current position.
- After March 1, members may make an additional \$300 request as long as funds are available. Priority will be given to first time requests.

**LATE REQUEST:**

If a PSE member would like to request Professional Growth Funds, but the **completed request** does not meet the minimum (10 days prior to training) requirement, the PSE member may submit a LATE REQUEST. A written rationale must accompany the application for Professional Growth Funds. Since this will require an expedited process to approve or deny, there is no guarantee a decision will be made prior to the training.

**REQUEST TO CHALLENGE:**

If a PSE member disagrees with the decision, the member may submit a written request, with additional information/documentation, to have the request reviewed again.

**BUDGET:**

The district financial administrator and the PSE President will maintain a report of expenditures with a running balance. This will be presented to the PSE membership at general meetings. An end-of-the-year report will be submitted from the district for the PSE membership.

**REGISTRATION/PAYMENT:**

- After approval, it is the employee's responsibility to register for the course/workshop.
- Payment arrangements are to be made with your building fiscal secretary for the course/workshop that has been approved.
- All requests for reimbursement (Form 6213F1) must be turned in to the Finance Department at District Office no later than August 31. *If mileage was approved by the committee at the time of your submission, you are responsible for submitting a reimbursement form.*

**SUBSTITUTES:**

If needed, substitute costs will come from the Professional Growth Fund, and will be in addition to the employee's \$500 annual amount.

School Year

Employee Name

Position/Title

Building/Department

Title of Workshop/Class

Location

Date(s)

Rationale for Request

Tuition/Course Fee

Transportation Cost: Miles driven

x per mile (Current IRS rate)=

Total Amount Requested

*(IRS rates are subject to change in January and June of each year)*

Sub Needed?

☐ Yes

☐ No

Date(s) & Time

Late Submission

*(Less than 10 days prior)*

☐ Yes

☐ No

Rationale

**Employee's Signature**

Date

**Administrator and/or Supervisor:**

I am aware of this request and agree that it will be beneficial to this employee and to the district. Comments:

**Administrator's and/or  
Supervisor's Signature**

Date

**Committee Chairperson:**

Tuition fee approved

Account code

Mileage approved (NOT to exceed)

Account code

☐ Denied

Reason

**Committee Chairperson's  
Signature**

Date

Date received complete application

**Return completed form and workshop/class information/description to the committee chairperson at least ten (10) working days prior to the date of the workshop/class by email.**