



# Professional Development Request Form

This form needs to be approved by your manager before your electronic time-off request can be approved.

## SECTION 1 – TO BE COMPLETED BY EMPLOYEE

<b>Employee Name:</b>	
<b>Course Title:</b>	
<b>Course Dates:</b>	
<b>Desired Course Outcomes:</b>	

**Attachments Required:**  **Travel Estimate:**  **Relevant Literature:**

SECTION 2A - TO BE COMPLETED BY EMPLOYEE	SECTION 2B – BY MANAGER/PAYROLL
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ITEM	COST	IF APPLICABLE		MANAGER: Please indicate if there are any specific instructions for payroll.
		Booked	Paid	
Registration Fees	\$			
Mileage	\$			
Accommodation	\$			
Materials	\$			
Other: _____ <i>ie: Airfare, Taxi etc.</i>	\$			
<b>Total Cost:</b>	\$			

## SECTION 3 – TO BE COMPLETED BY MANAGER

<b>Approval of Course:</b> _____ <i>Manager Signature</i>	<b>Date:</b> ____/____/____ (dd / mm / yyyy)
<b>Approve Online Time-Off Request:</b> _____ <i>Manager Initial</i>	
<b>ACCOUNTING CODE:</b> _____	

## For Administration:

Completed by Finance: \_\_\_\_\_ Entered by HR into HRIS: \_\_\_\_\_