



## School District 60 (Peace River North)

Learning Services Division  
10114 - 105 Ave  
Fort St John, BC  
V1J 2T8

For General Inquiries:  
Phone: (250) 262-6098  
Via email: [learningservices@prn.bc.ca](mailto:learningservices@prn.bc.ca)

### **School District 60/Northern Lights College EA Training Partnership**

#### **Request for Professional Development Funds**

School District 60 is working closely with Northern Lights College around the Educational Assistant Certificate & Diploma Program. At this time, we are pleased to offer a Professional Development Fund to support our educational assistants in their learning at Northern Lights College. In order, to make a request for ProD funds, an Education Assistant is required to be an employee of School District 60 (Peace River North)

For further information on this ProD fund, please contact (250)262-6087 or via email at [learningservices@prn.bc.ca](mailto:learningservices@prn.bc.ca)

To make a request for ProD funds, please complete the following application form in advance of taking a course. Please refer to these instructions in making a request.

**Please note the cost of tuition will be reimbursed and not the cost of any fees.**

1. Employees are asked to email this application to the attention of Danielle Evans at [learningservices@prn.bc.ca](mailto:learningservices@prn.bc.ca)
2. Once approved, Learning Services will confirm your ProD request.
3. Complete your course
4. Upon completion, employees will be expected to provide Confirmation of Completion & Confirmation of Payment to [learningservices@prn.bc.ca](mailto:learningservices@prn.bc.ca)
5. Learning Services will contact the employee regarding reimbursement.

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

Date of ProD application: \_\_\_\_\_

Home Address:


Email: \_\_\_\_\_

Phone: \_\_\_\_\_

NLC Student # \_\_\_\_\_ (if applicable)

Course Title:	
Program:	
Dates of Course:	
Cost of Course:	

Please remember to attach the following documents.

**Employee Signature:** \_\_\_\_\_

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**Learning Services to complete:**

*Pro-D Decision:* \_\_\_\_\_ *support* \_\_\_\_\_ *Need more Information* \_\_\_\_\_ *Non-support*

*Reason if denied:*
