

PROFESSIONAL DEVELOPMENT REIMBURSEMENT – CLAIM FORM

Faculty Member: _____

Division: _____

Describe the nature of your current professional/scholarly activity:

Items purchased (include name of vendor and amount: Attach **ORIGINAL** receipts):

Total Amount Requested: \$ _____ (Note that the minimum claim is \$250.00 or the balance remaining on the account.)

Describe briefly how the above items support your professional, scholarly or teaching activity:

To be completed by Division Secretary:

Division Account # _____

TOTAL PDR ALLOCATION: \$ _____

AMOUNT SPENT TO DATE: \$ _____

AMOUNT CLAIMED: \$ _____

BALANCE: \$ _____

Please forward this request with receipts to the Office of the Vice-President (Academic) for the amount requested:

Approved by the Provost and Vice-President, Academic Affairs and Research:

_____ **Date:** _____