

PROFESSIONAL DEVELOPMENT FUND

USER GUIDE

FOR

INFANT DEVELOPMENT/ABORIGINAL INFANT DEVELOPMENT
&
SUPPORTED CHILD DEVELOPMENT/ABORIGINAL SUPPORTED CHILD
DEVELOPMENT CONSULTANTS AND SUPPORT WORKERS
OF BRITISH COLUMBIA

Prepared By: The Professional Development Fund Committee

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**INFANT DEVELOPMENT (ID)/ABORIGINAL INFANT DEVELOPMENT (AID)
&
SUPPORTED CHILD DEVELOPMENT (SCD)/ABORIGINAL SUPPORTED CHILD
DEVELOPMENT (ASCD) CONSULTANTS AND SUPPORT WORKERS**

GUIDELINES FOR PROFESSIONAL DEVELOPMENT

1.0. Guidelines for Funding Allocation

Guidelines for both academic and non-academic courses funding listed below, will be adhered to as closely as possible. However, exceptions will exist and individual requests may be considered on a case-by-case basis and for exceptional circumstances. The Professional Development Fund (PDF) funding is based on the **April 1st- March 31st fiscal year.**

Funding Methods:

There is **one** consistent payment method for both Academic and Non- academic training that requires applicants to pay for training costs upfront.

- Applicants are reimbursed on **proof of successful completion of Academic** courses (grades), and **proof of attendance or certificate for Non- academic** courses.
- If this method of payment presents you with undue financial hardship and is problematic please contact the Project Manager, Elizabeth Cox to discuss options. You also need to tick the specific line on the Request for Funds form.
- The following are the maximum amounts of funding allotted per applicant.

Funding Amounts

The maximum amount of funding that consultants can apply for per year is \$1,000 for either all academic training or a combination of academic and non- academic:

- **Academic = Max. \$1,000 for tuition only & for 1 course per institution term.**
- Funding for course books and materials may be considered on a case-by-case basis for academic courses in exceptional circumstances.
- **Please ensure you know the institutions withdrawal deadlines. If you withdraw at any time from the course the bursary fund will not cover the course cost. IF unforeseen circumstances result in withdrawal mid term contact the Project Manager immediately to discuss your options.**
- **Non-academic = Max. \$500.**

Requests require matched funds from the agency or community up to the maximum of \$500.00. If an agency is unable to match funds, applications will be reviewed on a case-by-case basis in exceptional circumstances.

Applications **Deadlines** for Requests for Fund's for training are quarterly: **January 31, March 31, June 30, and September 30.**

Training Criteria: All training courses must be related, credible and relevant to providing early intervention services in BC. In addition courses that support the needs of the program and community for Aboriginal, remote/isolated or sole charge programs will also be considered.

Academic Credit Courses:

Funding is given for academic courses at post secondary institutions. Following are examples of Post Secondary Institutions offering applicable courses related to early intervention services:

- UBC Certificate and Diploma Courses in ID/SCD online courses and Summer Institute
- UBC Faculty of Education, External Programs Certificate in Early Childhood Education
- Vancouver Island University & University of Victoria, Child and Youth Care and First Nations Child and Youth Care Program (ladder program)
- Early Childhood Care and Education Degree
- Related programs at UNBC, Capilano University, Northern Lights College, Thompson River University, Athabasca University
- Camosun College: Indigenous Family Support Certificate
- Mental Health Certificate (York and Mount Royal)

Non-Academic Training:

Early Childhood Intervention Training and Assessment Requirements in the field: Local, Regional & Provincial In-Services, Workshops, and Conferences.

2.0 Criteria for Applicant Eligibility

2.0.1 Consultants: A consultant or the equivalent interested in applying for professional development funding **must:**

- Be employed as ID/AID& SCD/ASCD **consultant** or the equivalent fulfilling the duties and responsibilities of a consultant. This does not apply to a consultant on extended leave
- Have a minimum of 0.5 FTE between programs (i.e. 0.25 FTE with ID and 0.25 FTE with SCD);
- Discuss funding options and reviewed personal and community needs for ongoing professional development with their coordinator/ employer or appropriate program staff and/or Regional Advisor for guidance, to consider the courses most advantageous and relevant to their work experience and training;

2.0.2. SCD/ASCD Support Workers.

- **Support workers will be funded on a case-by-case basis where SCD/ASCD programs have limited resources or capacity to train support workers particularly those in rural and remote areas.**
- **The maximum amount of funding is \$500.00. However, applications with exceptional circumstances will be reviewed.**

A support worker interested in applying for professional development funding **must:**

- Be employed a minimum of 6 months.
- Be part of a child-care centre, preschool or program linked or contracted through an IDP/AID/SCD/ASCD program.

3.0 Criteria for Applying for Travel and Accommodation

- The cost of courses and travel/accommodations are considered separate items for funding
- Decisions will be approved on a case-by-case basis based on availability of funds
- The least expensive, most economical form of travel is required, such as carpooling, sharing accommodation, or rental car or flights if costs to drive are more expensive.
- Gas receipts are required and must be submitted within 2-3 weeks of the event for reimbursement;
- A maximum of \$45 is allowed for meals **NOT** provided at the training (see Application);

4.0 Steps to apply for Professional Development Funds

1. Discuss and review training needs in collaboration with your employer, supervisor or Regional Advisor.
2. Applicants must submit a Request for Funds for all types of training opportunities using the **Professional Development Request for Funds Form to the Project Manager by the quarterly deadline dates.**
3. Funding forms are available through Regional & Provincial Advisors, AID and SCD/ASCD Provincial websites, the Project Manager and also at the end of this User Guide. Follow the required steps and ensure to have your agency approve and sign the form.
4. Submit completed forms to Elizabeth Cox, Project Manager by the appropriate deadline dates. Send the form via e-mail to eocox@shaw.ca or fax it to **250-656-1231**.
5. Requests will be reviewed and approved by the Advisory Committee quarterly following the stated deadlines.
6. Applicants will be notified via email or by phone within 1 month of the deadline date.
7. Approved requests for reimbursement of funding will be sent to the Host Agency (BC Association of Aboriginal Friendship Centres) Accounting Department, and applicants will receive the funds directly from the Host Agency.

5.0 Contact Information

Aboriginal Infant Development and Aboriginal Supported Child Development Program Provincial Office

Office of the Provincial Advisors

Address: 551 Chatham Street
Victoria, B.C., V8T 1E1

Phone: 250-388-5593

Fax: 250-388-5502

Toll Free # 1-866-338-4881

E-mail:
AIDP Provincial advisor: advisor@aidp.bc.ca,
Website: <http://www.aidp.bc.ca>
ASCD Provincial Advisor: advisor.ascdp@bcaafc.com
Website: <http://www.ascdp.bc.ca>

Supported Child Development Program of British Columbia

Website: <http://www.scdp.bc.ca>

The Professional Development Fund Project Manager, Elizabeth Cox

Phone: 250-656-5424

Fax: 250-656-1231

E-mail: eocox@shaw.ca

APPENDIX A

REQUEST FOR FUNDS FORMS

PROFESSIONAL DEVELOPMENT REQUEST FOR FUNDS

Hosted by

BC Association Aboriginal Friendship Centres

551 Chatham Street, Victoria, B.C., V8T 1E1

Phone: 250-388-5593 or 1-800-990-2432 Fax: 250-388-5502

Website: www.bcaafc.com

To Applicants:

The Professional Development Fund is set up to support applicants working as consultants in the fields of ID/AID/SCD/ASCD and SCD/ASCD support workers to get the qualifications, skills and training they need to work with children and families. The Professional Development Fund Committee is responsible for overseeing the limited funds to ensure the funds are accessible to staff and are spent appropriately.

Applicants are requested to use the most economical and least expensive form of travel, i.e. carpool, shared accommodation, when possible, only claiming meals that are NOT provided while attending training. Mileage is no longer reimbursed and will change to reimbursing cost of gas only with receipts. **We must receive receipts within 2-3 wks from the event to submit claims.** Please refer to the **User Guide for details on Criteria and Eligibility** for funding. It can be obtained from your Regional or Provincial Advisor, or Elizabeth Cox.

Applicants are expected to review this form with their employer/supervisor to ensure expectations and requests for training are discussed and approved by the Supervisor. The Supervisor must sign the second page on the Request Form.

To ensure all applicants are supported and experience success in their funded professional development, the Committee suggests the following questions for you and your coordinator/supervisor as a reflection to guide your choice of training to ensure it is appropriate and related to your work. This is for your personal use only.

- 1. Is the training appropriate and does it relate to the competencies in the Framework of Professional Practice for your work? (For a copy contact the ASCD/AIDP Provincial Office.)**
- 2. Does it fit with your professional development goals or needs for training relevant to your position?**
- 3. Does it build on your training and knowledge and fit with your work experience and learning needs and styles?**

Thank you for considering these questions as part of your application process.

Use the following **Request for Funds Form** to apply for funding and submit it to **Elizabeth Cox, Project Manager to either of the following:**

Email: eocox@shaw.ca or FAX: 250-656-1231.

REQUEST FOR FUNDS FORM

Date of Request: _____

Applicant Information:

Name: _____

Program/Job Title: _____

Are you actively working in your position .5 Full Time Equivalent or greater? YES _____ NO _____

Address: _____

Agency: _____

Consultant in: IDP _____ AIDP _____ SCDP _____ ASCDP _____

Phone: _____ E-mail: _____ Fax: _____

Course/Training Information:

Type of educational/training course that you want to attend:

1. Academic Credit Course _____ UBC student number _____

**** Please make sure you know the institution's non-penalty course withdrawal deadlines. If you withdraw at any time from the course, the bursary fund will not cover the course cost.**

If personal circumstances occur out of your control contact Elizabeth Cox as soon as possible.

2. Non-Academic Training _____

3. Regional & Provincial In-Services, Workshops, and Conferences _____

****NB: A max. of 3 staff from one office can apply for the same training event**

***** If you are not able to pay for any type of training upfront, or your agency is not able to match funds for non-academic training please tick here _____**

The project manager will contact you. ** If your agency can't match funds please have your

Supervisor/employer sign here _____

Training description: Course Name, term, dates of training, institution & location.

***The most economical and least expensive form of travel & only meals not provided can be claimed.**

Specific funding details: _____

Tuition/Registration: \$ _____

****After assessing the cost of training registration or tuition, the following costs may be considered based on available funding. Receipts are required for payment:**

Accommodation: Full cost shared room/single ½ cost _____

Books/Training Materials: _____

Personal vehicle: **Gas** (receipt **Must** be submitted within 2-3 weeks) _____

Air Fare: _____

Ferry: _____

Meals. No alcohol; B=10 L= 15 D=20 _____

Taxi/car rental/parking: _____

Agency is to match funds for non-academic training, workshops, in-service and conferences:

Total cost _____ **Claim 50%:** _____

TOTAL REQUEST \$ _____

Employer/ Program Supervisor Approving Request: In signing below I verify my approval of the training request as relevant for the learning goals of this applicant who is actively working at this time.

Program/Agency & Address: _____

Supervisor Name: _____

Employer/Supervisor Signature: _____

Phone: _____ **E-mail:** _____ **Fax:** _____

Applicant's Signature: _____

Name & Address payment to be sent to: _____

Submit this request to Elizabeth Cox, Project Manager E-mail: eocox@shaw.ca or Fax: 250-656-1231