

School Year: _____ File Number: _____

**Walter Johnson High School
Request for
Professional Development Grant**

Teacher/Staff: _____

Department: _____

Resource Teacher: _____

Name of Program/Activity: _____

Location of Program/Activity: _____

Program/Activity Sponsor: _____

Description of Program/Activity and Benefits (please attach any additional information provided by program organizer):

Total amount of funding requested: _____ (grant funding will not include the cost of transportation or any room and board charges associated with program)

Have you sought other sources of support for this request? If yes, please list and identify if sources are available, pending or denied.

Please attach itemization of proposed expenses.

Signatures:
Teacher/Staff: _____ Date: _____

Approved:
Resource Teacher: _____ Date: _____

Principal: _____ Date: _____

**WALTER JOHNSON HIGH SCHOOL
EDUCATION FOUNDATION
PROCEDURES FOR REIMBURSEMENT OF
PROFESSIONAL DEVELOPMENT EXPENSES**

Reimbursement of approved professional development expenditures incurred by faculty at WJ High School from funds available for this purpose from the WJ High School Education Foundation will be made only as follows:

1. *Application* -- The Walter Johnson High School **Request for Professional Development Grant** must be completed and signed by the participating teacher/staff and by the applicable Resource Teacher. The request must include the completed **Statement of Expenses** with an estimate of expenses. ***The completed application is to be submitted to Principal, WJ High School.*** The Principal will provide to the Foundation a complete copy of any application for which Foundation funds are requested.

2. *Request for Reimbursement* -- A copy of the completed Statement of Expenses, with actual expenses and substantiation, including receipts, must be submitted for reimbursement. Program costs that are payable in advance will be paid by the Foundation directly. Please include correct payee name.

3. *Due Date* -- Completed expense forms must be submitted to the Foundation within 30 days following completion of the program for which reimbursement is sought. Failure to submit within 30 days may result in denial of the reimbursement.

4. *Evidence of Completion*: Teacher/staff must submit evidence of program completion within 30 days of completion. Failure to provide such evidence will result in withdrawal of grant funds. Any funds already distributed for the program will be immediately due and payable by the grantee.

If you have any questions, you may contact Marney Jacobs, President or Anat Schwartz of the WJ High School Education Foundation.

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STATEMENT OF EXPENSES

*If the program is approved, you must submit a copy of this form with substantiation of your expenses, including receipts, **WITHIN 30 DAYS** following completion of the program. Failure to submit within 30 days may result in denial of your reimbursement.*

The expenses below are estimated / actual expenses (circle one).

Your Name: _____

Date of Program: _____

Location: _____

Registration Fee: _____

Materials (itemize): _____

Other (describe and itemize): _____

Total Expenses: _____

Teacher _____ Date: _____