

LOCAL SPECIALISTS' ASSOCIATION
Operational Grant Request Form
Deadline: November 30th

For the year _____ to _____

This two-page form is to be used by a Local Specialist Association to obtain recognition as an active specialist group and to receive a professional development allocation from the L.S.A. fund. District and V.T.A. support funds will not be released until this form has been received. This form must be submitted to the Chairperson of the District Professional Development Committee, each school year before a funding grant for operations is disbursed.

Please print legibly:

Full Name of L.S.A.

President

School

Email

Phone

Treasurer

School

Email

Phone

Please provide a brief description of your L.S.A.'s objectives:

Please provide a brief description of your L.S.A.'s plans for the upcoming school year:

Number of members in the LSA:

Names of LSA members (with school/ site):

LSA President's Signature _____

Date: _____

Grant Provided: Yes or No

Date: _____

District PD Chairperson Signature: _____

Return by November 30th:

Chairperson, District Pro D Committee – VTA Office, pdchair@vernonta.com

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