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**OECTA Professional Development Fund Application**  
**for**  
**ABQ/AQ/College/University Course**

Submit package including *a) completed application form b) proof of course registration c) proof of course payment d) proof of course completion*

**Personal Information:**

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

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Present Teaching Status: Permanent  Occasional

**Course Information:**

Course Title \_\_\_\_\_

Beginning Date \_\_\_\_\_

Completion Date \_\_\_\_\_

NOTE: YOUR APPLICATION WILL BE CONSIDERED WHEN ALL COMPLETED DOCUMENTATION IS RECEIVED AT THE LOCAL OECTA OFFICE.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_