



IslandLink Library Federation
 3185 West Road
 Nanaimo, BC V9R 6X1
 1-855-927-2005 phone
lbeswick@islandlink.ca
<http://www.islandlink.ca>

IslandLink Library Federation (ILLF) Professional Development/Training Application

Name of Applicant:			
Library:			
Email:		Phone:	
Title of Course/Conference/Event: (one event per application)			
Sponsor of Event: (organization/group)			
Date:		Location:	
Purpose/Learning Objectives:			
Travel Costs (see ILLF Travel Policy Limits):		Other Costs:	
Accommodation		Registration/Fees	
Mileage		Staff replacement costs	
Ferries		Other (specify):	
Airfare			
Per diem			
Other (specify):			
TOTAL TRAVEL:		TOTAL OTHER	
Funding requested from IslandLink: \$ _____			
<i>I confirm that the applicant will not be reimbursed for the expenses being claimed from other sources.</i>			
Signature of Applicant or Library Director/Supervisor: _____			
IslandLink Approval:			Date:

Submit this form **PRIOR** to PD/training events.

For reimbursement, submit an IslandLink Travel Expense Claim Form, or IslandLink General Expense Claim Form if no travel is required, and a short (1 paragraph) report after the event to:

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