

Professional Development Reimbursement (PDR)



Eligibility Criteria and Process July 1, 2016 –June 30, 2017

What is a Professional Development Reimbursement (PDR)? A Professional Development Reimbursement (PDR) provides Early Care and Learning professionals residing in Alaska with funding of up to \$1,500 per State fiscal year (July 1—June 30) for higher education and/or training.

## Eligibility Criteria:

- 1. EDUCATION/TRAINING MUST HAVE BEEN COMPLETED WITHIN THE PAST 90 DAYS
- 2. You must be operating, or be a paid employee, of a licensed child care facility. (Military, Head Start, and School District employees are not eligible. Approved Providers are **only** eligible to receive PDRs for CPR/FA.
- 3. You must have an active/current/updated SEED Registry membership. You may submit or renew an application online at <u>www.seedalaska.org</u>. For more information, contact SEED at: <u>info@seedalaska.org</u> or 907.265.3194 or 855.265.7333.
- 4. You must pay any unpaid **thread** training balance(s), if applicable to receive a PDR.
- 5. Training must be in early childhood education, health and safety, facility administration or topics directly related to working with young children. Higher education/training must be successfully completed with at least a "C" equivalent or "Pass". Specific to conferences, <u>Full Conference attendance</u> is required or reimbursement may be denied.
- 6. PDR funds of up to **\$500/per State fiscal year** for <u>approved training</u> includes: classes, workshops, seminars, conferences, online training and CPR/First Aid.
  - $\circ$   $\;$  Conference registration fees will be reimbursed at the membership rate only
- PDR funds of up to \$1000/per State fiscal year for <u>higher education</u> include: accredited college or university undergraduate or graduate courses. Funds will cover training and/or higher education tuition costs including fees and books.
  - Higher education/trainings must have been **completed within the past 90 days of a PDR Application**. You may use a combination of funds for <u>approved training</u> and/or <u>higher education</u>.
- 8. You must submit the following document(s) with your PDR application: 1.) Receipts or proof of payment (credit card or bank statement) with your application for higher education/training: 2.) Proof of completion (copy of higher education or training transcript(s), certificate, credential, full conference attendance showing stickers on all sessions).

### PDR WILL <u>NOT</u> COVER OR REIMBURSE FOR THE FOLLOWING:

- Face-to-face or webinar training offered by thread
- Cost of membership fees for professional organizations
- Parking fees
- Funds already covered by other financial aid such as Pell Grants, Veteran's Administration Benefits, Scholarships, training/education paid by your Employer, Child Care Grant (CCG) Program Reimbursements, etc. PDR funds will be reduced by the amount of other scholarships and/or financial aid.

thread, SEED 3350 Commercial Drive, Suite 203 Anchorage, AK 99501 Telephone: 907.265.3194 / Toll Free: 1.855.265.7333 Fax: 907.265.3195 / Toll Free Fax: 1.855.265.3195 Email: info@seedalaska.org





**Professional Development Reimbursement (PDR)** 



# APPLICATION

#### July 1, 2016 - June 30, 2017

## \*\*EDUCATION/TRAINING MUST HAVE BEEN COMPLETED WITHIN 90 DAYS OF THIS APPLICATION\*\*

Thank you for submitting a Professional Development Reimbursement (PDR) Application. PDR funds will be awarded on a <u>FIRST</u> <u>COME, FIRST SERVE</u> basis. Payment will be made within 21-45 days after a completed application is received.

I certify that I operate, or am a paid employee, of a licensed child care facility or am an Approved Provider, and meet the Eligibility Criteria. The information in this request is true and accurate to the best of my knowledge. Falsification of any information may result in repayment of funds and the inability to receive future reimbursement funds.

Signature			Date		
	blue ink <u>or</u> complete electro ocessed. <u>ALL FIELDS ARE</u>		en print and sign you	r application. Incomple	e, illegible or incorrect
Applicant's Name					
Facility/Approved Provider Name			Administrator's Name		
Make Check Payable to_ paying with a business cr	edit card with an employee's	s name on the	card will be paid to the	(i e program/business <u>no</u>	Programs/Businesses <u>t</u> the individual)
Mailing Address			City		_ Zip
Phone ()		Email			
AK SEED Registry Usern	ame (If unknown, call 907.265	.3194 or email		Expiration Date	
Program is a <u>licensed</u> :	□ Center □Group Home	e 🗆 Home 🗆	Approved Provider	Costs were paid by:	□ Employer □ Self
I work with:	□ Infant-Toddler □ F	reschool	School Age	□Other	
I am using PDR funds to	<b>o earn/for/to:</b>	new CDA 🛛	Associates degree	Bachelor's degree	Master's degree
Licensing CPR/First	Early Childhood Administ Aid Certificate ation/training help you <u>move</u>				hours for Child Care
Higher Education/Training	g Title			_Actual Cost \$	
Higher Education/Training Title				_Actual Cost \$	
Higher Education/Training Title				_ Actual Cost \$	
Applicants will be notified	by email or mail. Please ini	tial the following	g statements before s	ubmitting your PDR Ap	oplication:
I have filled in all r Education/training I have included re documentation is I have submitted p I have paid any un	being reimbursed for higher equired fields on this applica was completed within the pr ceipt(s) or proof of payment acceptable) roof of higher education/trai paid <b>thread</b> training balance <b>n your completed and S</b>	ation ast 90 days for the higher e ning completion e(s), if applicab	ducation/training obta n documentation le	ained (electronic and pl	hotocopied or scanned
	33	50 Commercia	<b>, SEED</b> I Drive, Suite 203 e, AK 99501		STATE OF ALASSE

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