**AERO-AOCE’s Professional Development Grant**

**Goal:**

The Association of Educational Researchers of Ontario (AERO) - L’Association ontarienne des chercheur et chercheuses en Education (AOCE) is proud to provide a Professional Development Grant to support the ongoing professional development of educational researchers by providing funds to attend a conference, workshop, or course.

**Benefits:**

These awards provide up to $500 to help offset the following expenses:

* Registration fees;
* Transportation by ground or air; and
* Accommodation
* Other associated fees with professional development participation (e.g., membership dues, poster printing)

**Eligibility:**

Applicants and recipients must:

* Be an AERO-AOCE member in good standing.
* Be requesting support for an upcoming, future professional development opportunity
* Have approval from their supervisor to participate in the proposed professional development opportunity.
* Demonstrate how they will apply the acquired knowledge or skills to their work in educational research.
* not have received one of AERO-AOCE’s Professional Development Grants within 5 years.

Other consideration:

* The professional development opportunity must not lead to an academic degree.

**Applications:**

Applications are available on the AERO-AOCE website.

An application form must be completed, describing the professional development opportunity and the estimated expenses for transportation, accommodation and registration or other associated fees to attend the event. The grant will cover costs for transportation, registration and/or fees, and accommodation up to $150 per night (including tax). Costs exceeding the amount of the grant will be covered by the applicant. This grant is not intended to support tuition costs for students enrolled in a formal post-secondary training program. Original receipts must be submitted.

**Deadline:**

Applications for AERO-AOCE’s Professional Development Grant will be accepted twice a year, the deadlines being September 30 and January 30. These grants (up to $500 each) will be awarded at each deadline. Applications must be received by the AERO-AOCE Executive through email submission on or before AERO-AOCE’s submission deadline. Decisions will be made within two weeks of the submission deadline for each of the grant runs respectively. All applicants will be informed in writing shortly thereafter. Funds will be distributed to successful applicants once report form and original receipts have been submitted.

**Review and Decision Process:**

Applications are peer-reviewed by members of the AERO-AOCE Executive and AERO-AOCE’s Research and Resources Committee.

Key criteria include:

* Professional development goals of the educational activity
* The relevance to education research and the work of the applicant
* Intentions for sharing the knowledge/skills learned

Decisions by the AERO-AOCE Executive will take into consideration the recommendations of the review panel of AERO’s Research and Resources Committee and the availability of resources. All decisions are final.

Successful applicants will be required to sign a letter of acceptance.

**Reporting:**

Recipients of AERO-AOCE’s Professional Development Grant must submit the Reporting Form provided upon completion of the conference, course or workshop. The report covers:

* Feedback on the conference, workshop or course.
* The extent to which educational goals were achieved.
* Top three learnings.
* An explanation of how and when new knowledge or skills will be applied.
* New perspectives and/or contacts developed as a result of the experience.

For more information on the AERO-AOCE’s Professional Development Grant and other opportunities through AERO-AOCE, visit our website at <http://www.aero-aoce.org/> or email us at: info@aero-aoce.org

**AERO-AOCE’s Professional Development Grant -- Application Form**

**Complete all sections of this form and submit online through the AERO-AOCE website. Incomplete applications will not be considered.**

***Applicant***

|  |  |
| --- | --- |
| Name: |  |
| Position/Title: |  |
| Institution/Organization: |  |
| Full Contact Address: |  |
| Phone Number: |  |
| Email Address: |  |

Please attach a copy of your current resume or CV to this application.

***Professional Development Opportunity***

Describe the event. Attach a program description, if available.

|  |  |
| --- | --- |
| Name of conference, workshop or course: |  |
| Dates: |  |
| Location: |  |
| Facilitator or leader (if applicable): |  |
| Educational goals of the conference, workshop or course: |  |

Describe (maximum **300** words) how knowledge and skills developed through this conference, course or workshop will:

1. Benefit your practice in educational research and
2. Be shared with or disseminated to others.

If the conference, course or workshop is **outside of Canada**, explain reasons for seeking training outside the country (maximum **100** words).

***Budget***

Indicate all sources and amounts of funding for this conference, workshop or course.

|  |  |
| --- | --- |
| **Source of Funding** | **Amount ($)** |
| Funds provided from other organizations:(list) |  |
| Other sources:(describe) |  |
| Funds requested from AERO-AOCE’s Professional Development Grant(**maximum $500)** |  |

Indicate how funds from AERO-AOCE’s Professional Development Grant will be used according to the allowable budget categories.

|  |  |
| --- | --- |
| **AERO-AOCE’s Professional Development Grant Budget Category** | **Amount ($)** |
| Transportation(specify airfare, ground, etc.) |  |
| Registration |  |
| Accommodation(specify rate per night and number of nights required) |  |
| Other (excluding meals and beverages):(please explain) |  |
| **Total****(maximum $500)** |  |

**Signatures**

Signatures indicate that the applicant has the necessary supervisory permission to attend the above professional development opportunity and that the policies of AERO-AOCE’s Professional Development Grant will be followed if funding is approved.

**Applicant**

Name (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Supervisor**

Name (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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