



PROFESSIONAL DEVELOPMENT PRE-APPROVAL FORM (Interim effective April 1, 2022)

EMPLOYEE INFORMATION

Employee Name: _____ Employee ID: _____ Employee Status: ☐ Full-time
☐ Part-time

I am requesting approval for:

☐ Educational program (e.g. trade, certificate, diploma or degree at accredited academic institution)

Program Name: _____

Number of Courses in Program: _____

Number of Courses Completed: _____

☐ External course (e.g., department training, forum, podcast, seminar, webinar, workshop)

☐ Conference

☐ Membership

☐ Group Training (10 or more participants – attach list)

Describe the business rationale for attendance or membership:

Institution/Vendor Name	Course/Membership Name	Start Date	End Date	Reimbursement (Inclusive of Taxes)
1.				
2.				
Miscellaneous Training Expenses (e.g., course text books, exam fees)				
				Total

I hereby apply for training/conference/membership pre-approval and certify that the information given is true and complete to the best of my knowledge. I understand that not following the Professional Development policy may result in my application not being approved. I provide my consent to OLG to collect, use, retain and disclose my personal, employment and academic information for the purpose of verification, determining eligibility, complicity with OLG business requirements and management as it relates to this application or as permitted or required by law.

If an employee voluntarily terminates their employment with OLG within twelve (12) months following the date of the completion of the professional development, and the amount reimbursed to the employee by OLG for the professional development was equal to or more of \$5,000, the employee agrees to refund OLG the costs of the professional development in full.

Employee Signature: _____

Date: _____



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Director / Sr. Director Approval

For reimbursements less than \$1,000 for Full-time or \$500 for Part-time

Check the factors(s) below that contributed to the decision:

- | | | |
|--|---|--|
| <input type="checkbox"/> Budget | <input type="checkbox"/> OLG courses/on-the-job training considered first | <input type="checkbox"/> Cost-effective |
| <input type="checkbox"/> Job, career or industry related | <input type="checkbox"/> Business and strategy alignment | <input type="checkbox"/> Other (Explain) |

Describe the business rationale:

Decision on the request: ☐ Approved ☐ Not Approved

Name: _____

Signature: _____

Title: _____

Date: _____

Executive Committee Member (SVP or above)

For reimbursements greater than \$1,000 for Full time and \$500 for Part-time and for all Group Training (10 or more participants)

Decision on the request: ☐ Approved ☐ Not Approved

Name: _____

Signature: _____

Title: _____

Date: _____

SVP People & Culture

For reimbursements greater than \$5,000 for Full-time or \$2,500 for Part-time

Decision on the request: ☐ Approved ☐ Not Approved

Name: _____

Signature: _____

Title: _____

Date: _____

NOTE: Original documentation Must be retained by managers for audit purposes. Attach copies for Accounts Payable.



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Reimbursement and Signature Reference (per fiscal year)

External Tuition & Educational Programs and Conferences Cost	Full Time Employees	Part Time Employees	Required Approval
	\$1,000 or less	\$500 or less	Director / Senior Director
	Between \$1,000 and \$5,000	Between \$500 and \$2,500	SVP
	Greater than \$5,000	Greater than \$2500	SVP & SVP People & Culture

Memberships	Required Approval
	Director / Senior Director

Group Training	Full Time Employees	Part Time Employees	Required Approval
	Less than 10 participants		Director / Senior Director
	10 or more Participants		SVP



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Reimbursement Process

- Employee completes section 1 of the Professional Development Pre-Approval Form.
- Manager considers request for approval and completes section 2 of the form.

Account & Project Codes			
	Account	Dept ID	Project
External Course	630340	Your Dept ID	11226
Education Program	630340	Your Dept ID	11225
Miscellaneous Training Expense	630340	Your Dept ID	11227
Conference	630306	Your Dept ID	11276
Membership - Individual	630306	Your Dept ID	11275
Membership - Corporate	620400	Your Dept ID	N/A
Training-External Facilitator	630340	Your Dept ID	11224

If approved

or

For External Training, Conferences & Memberships

- Employee completes a Cheque Requisition form payable to the Vendor and attaches Training, Conferences & Memberships Pre-Approval form & back-up (e.g., brochure with fees). Refer to account & project codes.
- Employees in departments with a corporate credit card can process payment with same attachments as above.
- Manager with cost centre signing authority signs and tracks spend by employee.
- Employee registers for training, conference or membership.

For Education Tuition Reimbursement

- Employee registers, pays tuition and keeps all original receipts.
- At course end, Employee completes a Miscellaneous Expense Reimbursement Form, attaching Training, Conferences & Memberships Pre-Approval form, proof of passing grade and original receipt. Refer to account & project codes.
- Manager signs Form signs and tracks spend by employee.
- Employee submits to Accounts Payable.