

P.R.I.D.E. (Parent Resources for Information, Development & Education)
Federation of Foster Families of Nova Scotia
Trainer Expense Claim

Date(s) of Workshop: _____ Module: _____

Location: _____

Your Name: _____

Phone Number: _____

Mailing Address: _____

Postal Code: _____

Email Address: _____

Your Expenses

*Please complete Child Care portion on reverse of this form.

Date & Module (List each day separately)	Kilometres Travelled	Total Travel Cost (multiply 44.15¢ x km travelled)	Breakfast \$8.00	Lunch \$15.00	Dinner \$20.00	Child Care (bring forward from back of form)	Prep Allowance (Module 3, 4, 7, 11 & 12 & AS-2 - Max \$50) (Modules 1, 2, 5, 6 & 9 & AS-1, AS-3 & AS-4 - Max \$75)	Honorarium/ Admin Meeting/ Professional Development (\$50 per 3 hr session)	Misc. (must explain below & attach receipts)	Total
Totals:										

****Please complete one Expense Claim for each Module****

Explanation of miscellaneous items: _____

Signature of Trainer: _____

Date submitted: _____

Please submit to: **Training Department**
c/o Federation of Foster Families of Nova Scotia
99 Wyse Road, Suite 350
Dartmouth, NS B3A 4S5

Babysitting Claim

Number of Child(ren)-in-Care: _____ **Ages:** _____

Number of Biological/Adoptive Child(ren): _____ **Ages:**

Date	From (a.m. or p.m.)	To (a.m. or p.m.)	Number of Hours	\$10.60/hour 1 st child. \$4.00/hour additional children (max of 4 children)

Your Signature: _____

- Children up to 12 years of age: \$10.60 per hour for the first child. The rate for each additional child is \$4 per hour for up to four children per household and a max of 10 hours per day.
- Please note: time relating to babysitting extends from 12:00am-12:00am (i.e. midnight to midnight is one full day). If babysitting is required overnight, this is considered ‘respite’ which is a maximum of \$56.00 for a 24-hour period.