ACCOUNT #2010

FUNDING AND DISTRICTS BY REGION

Account #2010 funding amounts are based on a formula of \$7.00 per FTE, plus 2.5% of the District Funding Master allocation. For example, for 2022–2023 District 5A's FTE is 371.8 and its Funding Master allocation is \$193,906. So, $(371.8 \times $7.00 = $2,602.60) + (2.5% of $193,906 = $4,847.65)$ for a total of \$7,450.25.

Region 1 NORTHWEST	Name	FTE	2010 Funding
5A	Northern Shield	372	\$7,450
5B	Rainy River	90	\$3,009
6A	Thunder Bay	727	\$11,820
6B	Superior North	216	\$5,508

Region 2 NORTHEAST	Name	FTE	2010 Funding
1	Ontario North East	514	\$10,737
2	Algoma	761	\$12,315
3	Rainbow	541	\$8,998
4	Near North	541	\$9,359

Region 3 SNOWBELT and SOUTHWEST	Name	FTE	2010 Funding
7	Bluewater	902	\$13,748
8	Avon Maitland	902	\$13,032
9	Greater Essex	1,789	\$23,898
10	Lambton Kent	552	\$7,935
11	Thames Valley	2,191	\$29,387
18	Upper Grand	2,267	\$31,910
23	Grand Erie	1,107	\$16,148
24	Waterloo	2,739	\$36,939

Region 4 METRO and GOLDEN HORSESHOE	Name	FTE	2010 Funding
12	Toronto	6,495	\$83,887
13	Durham	1,741	\$22,721
16	York Region	3,240	\$42,426
17	Simcoe	1,901	\$25,841
19	Peel	3,379	\$43,507
20	Halton	2,003	\$26,890
21	Hamilton—Wentworth	1,622	\$21,977
22	Niagara	949	\$12,515
30	PSAT	167	\$4,675
34	Independent Educational Programs	167	\$2,594

Region 5 CENTRAL and EASTERN	Name	FTE	2010 Funding
14	Kawartha Pine Ridge	737	\$10,361
15	Trillium Lakelands	432	\$7,431
25	Ottawa-Carleton	5,139	\$68,390
26	Upper Canada	700	\$10,797
27	Limestone	553	\$8,308
28	Renfrew	304	\$5,793
29	Hastings— Prince Edward	408	\$6,494

Region 6 FRENCH LANGUAGE	Name	FTE	2010 Funding
31	Franco-Nord Ontarien	904	\$14,142
32	Centre-Sud-Ouest de l'Ontario	1,348	\$17,768
33	District de l'Est	1,699	\$22,819
35	Colleges and Universities	2,494	\$33,843

ACCOUNT #2010 CLAIM FORM

PROFESSIONAL DEVELOPMENT AND UNION TRAINING

District:			
Name of Contact:			
Work Location:		Work Phone:	
Work Location Addres	s:		
1. Title of Program/Eve	ent:		
Date:	Amount Claime	d: Number of OSSTF/FEESO Participants:	
2. Title of Program/Eve	ent:		
Date:	Amount Claime	d: Number of OSSTF/FEESO Participants:	
3. Title of Program/Eve	ent:	<u>'</u>	
Date:	Amount Claime	d: Number of OSSTF/FEESO Participants:	
Signatures and Date			
District or BU President:			
District Treasurer (if app	licable):		
Date:			

You may forward FULLY COMPLETED #2010 Claim Form to Mariya Zolotko, Financial Controller by email Mariya.Zolotko@osstf.ca