

## REQUEST TO ATTEND EDUCATIONAL CONFERENCE OR MEETING

*Submit this request to the Superintendent at least 30 days in advance.*

Request submitted by \_\_\_\_\_ Date \_\_\_\_\_

Name or Purpose of Conference \_\_\_\_\_

Location (City, College, Camp, Etc.) \_\_\_\_\_

Date Conference Begins \_\_\_\_\_ Ends \_\_\_\_\_

Departure Date \_\_\_\_\_ Time \_\_\_\_\_ Return Date \_\_\_\_\_ Time \_\_\_\_\_

- Will you be absent from classes? Yes  No
- Will a sub be needed: Yes  No
- Are you requesting reimbursement for expenses? Yes  No
- Please complete information below:

Expense	Anticipated Amount
Registration Fees	\$
Meals	\$
Lodging	\$
Transportation / Mileage	\$
Other Expenses <i>(please list)</i>	\$
	\$
	\$
	\$
	\$
	\$
TOTAL	\$

*Conference expenses must be documented **with itemized receipts** in order to be considered for reimbursement. Absolutely no reimbursement will be made for alcohol.*

*When possible, I will notify my supervisor a minimum of 24 hours in advance and/or find another person to take my place, if I am unable to attend this conference.*

\_\_\_\_\_ Signature of Employee

ADDITIONAL APPROVAL IS NECESSARY IF NOT PAID THROUGH NORMAL SOURCE

Account # \_\_\_\_\_ Amount \_\_\_\_\_

Approved  Denied      Building Admin Signature: \_\_\_\_\_

Approved  Denied      Superintendent Signature: \_\_\_\_\_

Date: \_\_\_\_\_