

Conference/Training Request

Name: _____ Date: _____

Request to attend: _____

Date/s of event: _____

Purpose of event: _____

Cost Breakdown:	Registration	_____	
	Lodging	_____	# of nights needed ____
	Meals	_____	
	Mileage	_____	
	Total estimated cost	\$ _____	-

Upon approval from your office principal and superintendent please contact Shannon to request registration and lodging arrangements/payments. Meal and mileage reimbursement will be paid when a travel voucher with supporting **itemized** receipts have been received by the business office.

In addition to the Conference/Training Request From an **Absent From Duty Form** is required.

Approved _____
Signature of Principal

Denied

Code Request: _____

Comments:

Approved _____
Signature of Superintendent

Denied