

(SCHOOL DISTRICT)

EMPLOYEE WORKSHOP/CONFERENCE REQUEST

NOTE: FORM MUST BE SUBMITTED TO THE BUSINESS OFFICE, (# of Days) DAYS BEFORE CHECK IS REQUIRED

- ❖ NEEDS TO BE SENT IN WITH CHECK, MAKE A COPY TO ATTACH AS BACKUP PLEASE ALLOW FOR APPROVAL PROCESSING TIME
❖ EMPLOYEES MUST HAVE (SUPERVISOR) APPROVAL PRIOR TO SUBMITTING THE FORM
❖ A SEPARATE FORM MUST BE SUBMITTED FOR EACH CHECK REQUESTED
❖ CONFERENCE/WORKSHOP INFORMATION MUST BE ATTACHED TO EACH FORM
❖ IF REGISTRATION NEEDS TO BE SENT WITH CHECK, MAKE A COPY TO ATTACH AS BACKUP

Employee _____ School/Dept. _____

Date of Request _____ Date(s) of Conference _____

Name and Location of Workshop/Conference _____

Justification for Travel (Benefit to the District) _____

Other persons attending with you: _____

CHECK PAYABLE TO: _____

ACCOUNT NUMBER _____

Registration \$ _____
Lodging \$ _____
Per Diem (Meals) \$ _____
Airfare \$ _____
Mileage (\$ Amt. X _____ miles) \$ _____
Other (specify) _____
Bridge Fare \$ _____
TOTAL \$ _____

Employee Signature _____ Date _____

APPROVED: _____yes _____no

Supervisor Signature _____ Date _____