

NON UNION STAFF and ADMINISTRATOR PROPOSAL FORM

NON "SDC" RELATED TRAVEL and PROFESSIONAL DEVELOPMENT PROPOSAL FORM

I	NAME:	DATE:
	School:	Credential Expiration:

II	SIGNATURES	
	Signature of Requestor:	DATE:
	Approval Signature of Supervisor / Superintendent and Date	

IMPORTANT: PROPOSALS FOR NON-COLLEGE CREDITS, FUNDING, AND/OR DAYS AWAY FROM SCHOOL MUST BE APPROVED IN ADVANCE.

III	ACTIVITY:		
	Location		
	Date(s)		Evaluation Due
	# hours requested	# credits requested	# non-college credits
	Description of Activity		ck here if material is attached

IV	RELATIONSHIP TO PROFESSIONAL GROWTH PLAN
	Related goal is highlighted and attached.

V	EXPENSE INFORMATION		
	Projected expenses:	\$	Registration/Tuition
		\$	Meals GSA Per Diem Rate
		\$	Lodging, include daily rate and number of days
	TO CONF	\$	Travel(current federal rate)x _____ miles (Attach Mapquest-HOME to CONF)
	1/2022 per mile is \$0.585		
		Deduct usual mileage	\$- Usual home to work travel (Attach mapquest)
		Total allowed	\$ Difference of Conf and Work travel
		\$	Other
		\$	Total
	EXPENSE INFORMATION		
	Method of Payment		Amex Credit Card
			Reimbursement / Receipts
			District Funded Check - Direct Pymt to Vendor