

# HACIENDA LA PUENTE UNIFIED SCHOOL DISTRICT

\_\_\_\_\_  
Date

TO: \_\_\_\_\_  
Appropriate Executive Staff Member

FROM: \_\_\_\_\_  
Name and Signature of Principal \_\_\_\_\_ School/Site \_\_\_\_\_

SUBJECT: **REQUEST FOR CONFERENCE, MEETING, AND WORKSHOP ATTENDANCE**

**NAME(S) & POSITION(S) OF ATTENDEES**

**(Use an additional sheet if necessary):**

Name	Position	Name	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**DESCRIPTION OF CONFERENCE/MEETING/WORKSHOP:**

Date(s): \_\_\_\_\_ Location (City/State)\*: \_\_\_\_\_

Sponsoring Organization(Spell out acronyms): \_\_\_\_\_

**Nature and/or Purpose:**

\_\_\_\_\_  
\_\_\_\_\_

**Information Learned will be shared in following manner:**

\_\_\_\_\_  
\_\_\_\_\_

**COST FACTOR:**

Registration	_____	Mileage	_____	Advanced Requested**	_____
Meals	_____	Airfare	_____	Total Estimated Cost per Person***	_____
Lodging	_____	Other	_____	Total Estimated Cost	_____
		Substitutes	_____		

**SOURCE OF FUNDS:**

Pseudo: \_\_\_\_\_ Name of Account/Project: \_\_\_\_\_

**APPROVAL:**

\_\_\_\_\_  
Appropriate Executive Staff Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Superintendent's Signature (If Required)

\_\_\_\_\_  
Board Approval Date (If Required)

\* If out of state, board approval is required.  
\*\* \$200 - \$1,000, Immediate Supervisor and Division Administrator approval is required  
\*\*\* If over \$1,000.01 or more, Division Administrator and Superintendent approval is required