

APPENDIX L (Article 16)

TWIN HILLS UNION SCHOOL DISTRICT

REQUEST FORM FOR TRAINING AND CONFERENCES PER ARTICLE 16

NAME _____ DATE _____

ASSIGNMENT _____ SCHOOL _____

TITLE OF TRAINING OR CONFERENCE YOU ARE REQUESTING TO ATTEND:

CHECK ONE:

_____ THE TRAINING/CONFERENCE TAKES PLACE DURING CONTRACT HOURS

_____ THE TRAINING TAKES PLACE OUTSIDE OF CONTRACT HOURS

LENGTH OF TRAINING/CONFERENCE (IN HOURS) _____

DATE(S) OF TRAINING/CONFERENCE: _____

COST OF TRAINING/CONFERENCE: \$ _____ (TOTAL FOR ALL DAYS)

ATTACH COPY OF DOCUMENTATION FOR TRAINING/CONFERENCE (IE FLYER)

EXPLAIN HOW THIS TRAINING OR CONFERENCE WILL REFLECT THE GOALS OF THE SCHOOL SITE PLAN AND DISTRICT PROGRAMS, AND HOW IT WILL BENEFIT YOUR CLASSROOM TEACHING (CONTINUE ON BACK IF NEEDED)

If you prefer units (credit awards) which may result in salary column movement, check the line below and submit Apx C:

_____ I prefer units rather than pay, Appendix C will be completed and submitted.

PRINCIPAL OR IMMEDIATE SUPERVISOR APPROVAL:

DATE: _____

SUPERINTENDENT APPROVAL:

DATE: _____

Compensation is limited to current school year, compensation must be paid in the same school year training was completed.