

**Directions**

1. Reference in Outlook the Release Time Calendar for sub availability.
2. Reserve sub time on Release Time Calendar.
3. **Complete Supporting Documentation for Out-of-State travel on side 2.** Attach: A written description articulating the necessity, alignment, and anticipated value of the experience, copies of conference sessions, agenda, etc.
4. PLA form initiated by attendee if requesting to attend conference.
5. PLA to supervisor for approval. **If renting a car, signature of Director of Business Services is required. \***
6. Supervisor verifies "Substitute Work Schedule."
7. **Submit to Office of School Improvement** for submission to cabinet.
8. PLA form returned to budget manager.  
**Budget manager requests substitute**

Name \_\_\_\_\_ Application Date \_\_\_\_\_  
 Position \_\_\_\_\_ CPS ID # \_\_\_\_\_  
 Building \_\_\_\_\_

**I request permission to attend the following:**

Name of event \_\_\_\_\_  
 Location of event – City/State \_\_\_\_\_  
 Name of organization sponsoring event \_\_\_\_\_  
 Are you a member of this organization?  Yes  No  
 Date(s) of event (inclusive) (m/d/yr) START \_\_\_\_\_ END \_\_\_\_\_  
 Reason \_\_\_\_\_  
 Return To: \_\_\_\_\_

FUNDING SOURCE	Key	Object	Amount
<input type="checkbox"/> PD Account			\$
<input type="checkbox"/> ECA Account			\$
<input type="checkbox"/> Grant			\$
<input type="checkbox"/> Other			\$
<input type="checkbox"/> Paid by other school			\$
<input type="checkbox"/> Paid by an outside agency (Attach billing information form.)			\$

**Estimated cost of attendance**

Number of substitute days \_\_\_\_\_ X \$ 126.00 = \$ \_\_\_\_\_  
 Lodging # of nights \_\_\_\_\_ X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Meals # of days \_\_\_\_\_ X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 (*Meals not to exceed \$35.00 per day*)  
 Registration fee\* (not including any membership fee) = \$ \_\_\_\_\_  
 Transportation Air (coach fare) \* \$ \_\_\_\_\_ Intra-city transportation \$ \_\_\_\_\_  
 Rental car\*\* \$ \_\_\_\_\_ Miles \_\_\_\_\_ @ 55¢ per mile \$ \_\_\_\_\_  
 Estimated cost of all transportation = \$ \_\_\_\_\_  
**Total estimated cost = \$ \_\_\_\_\_**

**I understand the following:**

- Prior approval *must* be received for all travel including that for which you are a presenter.
- Out of state travel *requires the prior approval of the Superintendent's administrative team.*
- Professional Leave Applications not approved prior to travel will not be reimbursed.
- Advance payment of registration or airfare should be made by the district. Employees who prepay these expenses will not be reimbursed until the employee returns from their travel.
- Expenses for **rental vehicles will not be reimbursed without prior approval of the Director of Business Services.** The district will not assume any liability for damages to rental vehicles under any circumstances. \_\_\_\_\_  
**Rental Car Approval: Director of Business Services Signature\***
- Expenses are subject to Finance Procedure Regulations. Regulations can be found <http://www.cpsk12.org/Page/5772>.

**Substitute Requirements:**

No Substitute Required  Substitute Required  
 Prearranged Substitute  
 Prearranged Substitutes Name \_\_\_\_\_  
 Prearranged by: \_\_\_\_\_ Date \_\_\_\_\_  
**Supervisor** Indicate Substitute Work Schedule (including travel time):  
 Please check – (  ) A DAY (  ) B DAY (  ) C DAY (  ) D DAY  
 All Day \_\_\_\_\_  
 Half Day AM \_\_\_\_\_  
 Half Day PM \_\_\_\_\_  
 Custom (minimum 2 hours) \_\_\_\_\_  
**\*All subs are charged as full or half day**  
 Confirmation # \_\_\_\_\_  
 \_\_\_\_\_  
**Building Principal / Supervisor's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

Approved as requested  
 Maximum amount approved \$ \_\_\_\_\_  
 Not approved  
 \_\_\_\_\_  
**Budget Manager's Signature (Supervisor paying for expenses)** \_\_\_\_\_ **Date** \_\_\_\_\_

**PRIOR APPROVAL REQUIRED by SUPERINTENDENT'S ADMINISTRATIVE TEAM**

Review Date \_\_\_\_\_ **Approved:**  **Denied:**  **Admin. Team Signature:** \_\_\_\_\_  
 Comments: \_\_\_\_\_  
 \_\_\_\_\_

