



# Administrative Conference Request

Name: (printed) \_\_\_\_\_ School/Department: \_\_\_\_\_

## Request for Approval – Administrator Attendance at Conference

**Registration Fees:** After approval, register yourself using a ‘Purchase Order Number’ which can be obtained by contacting the purchasing department at extension #1915. If a P.O. is not accepted, the district will write a check, time permitting. If the deadline is near, please use a personal credit card and get reimbursed.

**Reimbursement Procedures:** All receipts must accompany Form G-10.

Name of Conference: \_\_\_\_\_

Location of Conference: \_\_\_\_\_ Deadline for Registration: \_\_\_\_\_

The date(s) of the conference is (are): \_\_\_\_\_

Estimated Expenses: Meals: \$\_\_\_\_\_ Lodging: \$\_\_\_\_\_ Registration Fees: \$\_\_\_\_\_ Travel: \$\_\_\_\_\_ (# of miles)

Will you be granted any funds, materials, or any other compensation for attending? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, in what amount? \_\_\_\_\_

Total Expenses: \_\_\_\_\_  Title II A  Title I  General  Other Source \_\_\_\_\_

Conference Summary (Or attach any descriptive documents regarding the conference)

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

Signature of Administrator: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Title Approval Signature: \_\_\_\_\_  Approved  Denied Date: \_\_\_\_\_  
(Required for all Title Related requests)

Signature of Superintendent: \_\_\_\_\_  Approved  Denied Date: \_\_\_\_\_