



Nondeductible Leave Day Request

Name: (printed) _____ School/Department: _____

Request for Approval – Teacher Attendance at Conference

Registration fees: Teachers are to pay their own pre-conference expenses, such as registration fees, etc., if less than \$25.00. If registration fees amount to more than \$25.00, conference registration forms must be filled out along with information on where to send check, and to who it should be made payable.

Reimbursement procedures: All receipts must accompany a Travel and Conference Reimbursement Request form located on the [Staff Forms](#) page of the Ionia Public Schools website, in addition to a completed email attendance report (described below), and be returned to the business office.

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? _____

*If compensation is granted for participation/attendance, the employee will pay the funds to the district or choose to take a non-paid day. Please contact the Superintendent to request a non-paid day.

Total Expenses: _____ Title II A Title I General Other Source _____

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

Signature of Employee: _____ Date Submitted: _____

Signature of Principal/Supervisor: _____ Approved Denied Date: _____

Title Approval Signature: _____ Approved Denied Date: _____
* Required for all Title Related Requests

Signature of Curriculum Director: _____ Approved Denied Date: _____
* Required for all General Fund Requests

Central Office Approval: _____ Approved Denied Date: _____
* Director of Finance or Superintendent

AUTHORIZATION EMAIL: required before obtaining substitute

_____ (email sent upon conference approval)

For Office Use ONLY:

General Ledger Account #: _____