

- Workshop or Conference Information
- Leave Request Form
- Staff Development Request Form (Submit to building principal)
- Completed Registration

LAKEVIEW STAFF DEVELOPMENT REQUEST FORM

NAME: _____ DATE: _____

Request: (Please name or describe the staff development opportunity you or your group wish to partake in):

Category of Request:

- Teaching and Learning Processes, Communication (District Goal #1)
- Curriculum and Instructional Strategies (District Goal #2)
- Data (District Goal #3)
- Technology (District Goal #4)
- Climate (District Goal #5)
- Other Category of request (please specify)

Location of Request (Reserve rooms with secretary if done within district): _____

Budget Request:

Resources Needed	Individual Cost	Group Cost
Transportation (\$ ___/mile)	\$	\$
Food	\$	\$
Lodging	\$	\$
Registration	\$	\$
Subs. Teacher (\$ ___/day)	\$	\$
Facilitator Expense if housed within district	\$	# of people involved
Total hours at \$ ___ if housed within district	\$	\$
Final Budget Total	\$	\$

How do you or your group believe this opportunity will positively impact student achievement?

Administration or Vision's Committee Approved

Comments:

Administration or Vision's Committee Denied

Date: