Professional Development Pre-Approval Form

Please note that ***pre-approval is required for all professional development activities,*** including workshops, seminars, graduate courses, professional membership or other professional learning activities, in order to receive reimbursement and/or credit toward salary advancement. The pre-approval process is not considered complete until this form is returned to the educator with the appropriate signatures.

Name: _____ School: _____

Professional Development Activity: _____

Date(s): _____ Substitute coverage required: Yes____ No____

Section A: Activity Type

- ☐ Graduate Course
- ☐ Workshop/Seminar/Conference
- ☐ Other (i.e. professional membership): _____

Upon successful completion of this PD Activity, I anticipate the following (check all that apply):

- ☐ Graduate Credits to be awarded
- ☐ PDPs to be awarded
- ☐ Advancing on the salary schedule *(**Please note once graduate credits are awarded the eductor should contact Kathleen Genthner to make an appointment to record the awarded credits once transcripts have been issued.**)*

Section B: Registration Details

PD Activity Name: _____Registration/Tuition Cost: $_____

PD Activity Description: (**Please provide a description of the PD activity. This may be a conference flyer or the course description for graduate courses or a direct link.**)

_____

_____

_____

_____

Section C: Anticipated Supplies/Materials

Item	Cost

Section D: Travel Expenses

To be completed only if requesting reimbursement for travel expenses related to the requested professional development activity.

Destination: _____ Address: _____
Estimated Mileage (If submitting for reimbursement)

Mileage: _____x .725=$_____

Toll(s): $_____ Parking Fee(s): $_____

Airfare: $_____ Car Rental: $_____ Public Transportation: $_____

Section E: Meals

Please note that MGL Chapter 44 § 58 strictly prohibits a city or town from paying for alcohol, tobacco, or any other entertainment. **Original, itemized receipts must be submitted when seeking reimbursement.** If any of the aforementioned items are included on the itemized receipts the reimbursement will NOT be processed.

Estimated Cost of Meals (including tax & tip): $_____

Section F: Lodging Expenses

Please note that personal phone calls or expenses incurred may not be included. When submitting final expense reimbursement documents, the original paid hotel receipts and a copy of the credit card statement must be included in order to be processed.

Daily Rate: $_____ # of Nights: _____ Subtotal: $_____

Room Tax: $_____ Occupancy Tax: $_____ Sales Tax:$_____ Subtotal: $_____

Lodging Grand Total: $_____

Total Reimbursement Request

Please total the amount you anticipate requesting reimbursement for by adding the amounts in Sections B through F of this form.

Total Reimbursement Request: $_____

For Office Use Only Below This Point

Fund Verification

The Office of Teaching & Learning will verify available funds and note if a discrepancy in the remaining funds exists. In the event that the amount requested exceeds the available funds, the pre-approval will be for the amount indicated in the available funds.

Amount Requested: $_____ Available Funds: $_____

Approval Process

Educators should submit this form to their building Principal to begin the approval process. Once approved by the Principal the form will be forwarded to the Office of Teaching & Learning to verify there are sufficient funds and that the request is consistent with school and district goals. Once approved by the Office of Teaching and Learning the form will be forwarded to the Assistant Superintendent of Finance and Operations and finally to the Superintendent of Schools for final approval. Upon completion of this process the form will be returned to the educator at which point the pre-approval process is completed. Completed Pre-Approval for Professional Development Forms MUST be included when submitting the Final Expense Reimbursement form to process the reimbursement.

Funding Source: _____ Line Item: _____

Approval Decision	Approval	Date
☐ Approved ☐ Denied	Principal:	
☐ Approved ☐ Denied	Executive Director of Teaching & Learning:	
☐ Approved ☐ Denied	Assistant Superintendent of Finance & Operations:	
☐ Approved ☐ Denied	Superintendent of Schools:	