

**WATERBURY DEPARTMENT OF EDUCATION
OFFICE OF SUPERINTENDENT OF SCHOOLS****APPLICATION FOR PROFESSIONAL DAY****Applicant's Name:****School:****Date(s) Requested:****Date Submitted:****Assignment:****Substitute Required:****Reason for Request:** (Describe conference/seminar and its relevancy to your position and **attach information.**)

The applicant responsible to provide their supervisor a written report within 2 weeks regarding what they learned on the professional day. The applicant must be ready and willing to share information gained to a school/district audience at the request of a supervisor.

How will you share the information learned?

Who do you intend on sharing this information with?

How does this professional day tie into your Student Learning Objective?

Itemize costs if you are requesting reimbursement

Funding Source:

Item	Amount
Registration Fee	
Mileage (76 cents per mile)	
Meals	
Lodging	
Other-Please Specify	
Total:	

If Applicable, Content Supervisor's Approval

Yes/No

Signature

Date

1. Principal's Approval

Yes/No

Signature

Date

2. Assistant Superintendent/ Chief Academic Officer's Approval

Yes/No

Signature

Date

****All contractual obligations for submission must be adhered to.****