

REQUEST FOR PROFESSIONAL DAYS

1. NAME _____

2. NAME OR TYPE OF MEETING _____

3. LOCATION OF MEETING _____

4. DATE OF MEETING _____

5. COST TO THE BOARD OF EDUCATION

a. Mileage _____

b. Registration Fee _____

c. Number of Meals _____

Approximate dollar amount _____

d. Number of nights lodging _____

Approximate dollar amount _____

e. Bus Needed? Yes _____ No _____

Bus Driver? Yes _____ No _____

Departure time _____ Return time _____

6. PERSON OR NAME TO WHOM CHECK SHOULD BE MADE _____

7. WILL SUBSTITUTE BE NEEDED? YES _____ NO _____

8. HOW MANY STUDENTS (IF ANY) WILL PARTICIPATE? _____?

Signed

Building Administrator _____ Date _____

School Employee _____ Date _____

Form to be completed and submitted to the Superintendent's Office at least 5 days before board of education meeting. **All requisitions for expenses must be submitted with this form.**

APPROVED BY BOARD ON _____

Month

Day

Year