

**Request for Inservice Training Reimbursement**

TO: Charles H. Bohlen, Jr., District Superintendent

DATE: \_\_\_\_\_

Part I

Name: \_\_\_\_\_

Title of Workshop, Conference or Course: \_\_\_\_\_

Dates: \_\_\_\_\_

I estimate my expenses to be as follows:

Registration fee, tuition \_\_\_\_\_

Transportation\* \_\_\_\_\_

Meal(s)\* \_\_\_\_\_

Motel Accommodation\* \_\_\_\_\_

Total \_\_\_\_\_

\* Not applicable for approved college course work.

Please provide a short statement as to how this workshop, conference, or course applies to your present position with the BOCES, and will improve your performance in that position.

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Approved \_\_\_\_\_ Exceptions \_\_\_\_\_

Denied \_\_\_\_\_ Conflict with other responsibility;

\_\_\_\_\_ Employee attended similar training within last year

\_\_\_\_\_ Budget constraints

\_\_\_\_\_ Not applicable to position with BOCES.

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_  
District Superintendent\_\_\_\_\_  
Date

I hereby apply for the following expenses, incurred in the successful completion of the conference previously approved. Receipts are attached.

\_\_\_\_\_  
Employee's signature\_\_\_\_\_  
Date

The amount of \$\_\_\_\_\_ is approved for reimbursement.

\_\_\_\_\_  
District Superintendent\_\_\_\_\_  
Date