

NEWMAN-CROWS LANDING UNIFIED SCHOOL DISTRICT  
CONFERENCE REQUEST 2018

Name \_\_\_\_\_ School Site \_\_\_\_\_ Date \_\_\_\_\_  
 Title of Conference \_\_\_\_\_  
 Location (exact address) \_\_\_\_\_  
 Date(s) of Attendance \_\_\_\_\_  
 Departure Date and Time \_\_\_\_\_ Return Date and Time \_\_\_\_\_

Funding Source			
	Expenses	Estimate	To be completed <b>after</b> Actual Expenses
Registration Fee			
District Car (Attach request form)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Personal Car Mileage:			
No. Miles	X .545 mile =		
<b>(maximum of 400 miles)</b>			
<b>If a district vehicle is available, you may elect to use your vehicle, but you will only be reimbursed for one-way travel.</b>			
Lodging:			
Number of days:			
Parking			
Meals			
Meals per day		\$10 breakfast \$15 lunch \$30 dinner	
<b>Maximum of 3 Meals per day with a cap of \$55.00</b>			
Budget Account Number:			
Substitute teacher costs:			
\$ _____	per day x _____	days= _____	
<b>Total Costs:</b>			

**Please attach conference brochure (be sure to keep one for your information)**  
**Please describe the expected positive input this conference/training will bring to your assignment/classroom:**

Approval \_\_\_\_\_ Cabinet Date: \_\_\_\_\_

Site Administrator \_\_\_\_\_ Date Superintendent \_\_\_\_\_ Date \_\_\_\_\_

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