

**MENDON-UPTON REGIONAL SCHOOL DISTRICT
CONFERENCE OR WORKSHOP REQUEST FORM**

2019 - 2020

Name: _____ Date: _____ School: _____

I am requesting _____ Conference/Workshop day(s) on _____

Sponsoring Organization: _____

Title of Conference/Workshop: _____

Directions: To request attendance at a conference or other professional activity, please fill out this form completely.

The following information is required before final approval can be given:

- Principal's Signature
- Back-up/registration information for conference/workshop, showing the conference fee, must be attached to this form
- Account that the conference/workshop will be paid from

Step 1: Registration/Payment Information

All conference/workshop registrations that have a fee require a purchase order and must be processed through Central Office. *The district will not reimburse staff members for conference registrations.*

Step 2: Payment Information

Cost of Conference: _____

Account Name/Number: _____

Grant Source: _____

Step 3: Goal Alignment

Identify and explain how the conference is aligned to district and school goals, as well as your Individual Professional Dev. Plan:

District Strategic Goal _____

School Improvement Goal _____

Individual Professional Dev. Plan _____

Step 4: Substitute Coverage

Substitute Coordinator notified: Yes No

Step 5: Follow-up

I will share/disseminate the conference information with colleagues by writing a summary of what I gained and present to staff or a team of teachers.

Team/Group to be presented to: _____ Date of presentation scheduled: _____

APPROVAL

Principal

Date

Maureen Cohen, Assistant Superintendent of Schools

Date