

Professional Development Approval Form

Name(s) _____ Date _____

Workshop Information

Title of Workshop/ Conference			
Date of Workshop/		City	
Is registration	<input type="radio"/> Yes * <input type="radio"/> No **Registration form and information must be attached.		
Does registration require payment in advance?	<input type="radio"/> Yes <input type="radio"/> No	Registration Cost	
Approved: <input type="radio"/> Yes <input type="radio"/> No	Approved: <input type="radio"/> Yes <input type="radio"/> No		
Principal's/Supervisor's Signature	Date	Curriculum Director's Signature	Date
Account Number _____		Approved: <input type="radio"/> Yes <input type="radio"/> No	
Special Programs Director's Signature	Date	Superintendent's Signature	Date

Transportation Request

Is transportation needed?	<input type="radio"/> Yes <input type="radio"/> No
Departure Time	
Approximate Return Time	
Type of Vehicle Needed	<input type="radio"/> Passenger Van <input type="radio"/> Personal Vehicle <input type="radio"/> Other _____
Number of Vehicles Needed	
Central Office Use Only Approved: <input type="radio"/> Yes <input type="radio"/> No Comments:	

Hotel Request

<i>All reservations will be made by the Central Office.</i>	
Are hotel reservations	<input type="radio"/> Yes <input type="radio"/> No necessary?
Hotel Name	
City	
Phone Number	
Check-in Date	
Check-out Date	
Number of Rooms Needed	
Type of Room Requested	<input type="radio"/> Double <input type="radio"/> King
Central Office Use Only Hotel Confirmation Number:	