

**SCHOOL TOWN OF HIGHLAND
Request for Professional Leave Form**

Name: _____ Date Submitted: _____
 Subject and/or Grade Level: _____ School: _____
 Substitute Required: Yes No If yes: AM PM Full Day
 Principal, if substitute required, to be paid from: General Fund Grant
 Principal, if substitute paid from Grant, title of Grant: _____
 Central Office, substitute payment Grant account number: _____

I REQUEST TO ATTEND: *Attach registration form and/or information sheet, if applicable.*
 WORKSHOP or CONFERENCE TITLE/OTHER: _____

City/Location: _____ Date(s): _____ AM PM FULL

FUNDING IS NOT BEING REQUESTED. *Check this only if NO funding of any type is being requested.*

I need a Purchase Order Number to Register. I have a PO Number - # _____

FUNDING REQUESTED: <i>(Check all that apply)</i>	Title of Grant Paying Expenses
Registration Fee	
Meals (Max. \$50 a day/itemized receipt required)	<i>To be filled out by Principal</i>
Lodging (Actual cost with receipt required)	
Parking (Actual cost with receipt required)	Account # (if applicable)
Mileage	
Other	<i>To be filled out by Central Office</i>

Is training related to District or School Improvement/Growth Initiatives/Goals/Objectives? Yes No
 If yes, which initiatives/goals/objectives? _____

Purpose for attending workshop/conference: _____

Reviewed by School Administrator:	Date:	
Signature:	Approved	Denied
	Reason Denied:	
Reviewed by:	Date:	
Signature:	Approved	Denied
	Reason Denied:	
Reviewed by Superintendent:	Date:	
Signature:	Approved	Denied
	Reason Denied:	

Comments:

School Board Approved Denied Date: _____

Completion of this form does not guarantee approval. If requesting funds, this form must be completed correctly and turned in to the central office at least 10 days prior to the next board meeting; if not, the form may not be approved. If NOT requesting funds, this form must be completed correctly and turned in to the central office at least 7 days prior to the requested date.