

SOUTHWEST PARKE COMMUNITY SCHOOL CORPORATION
PROFESSIONAL GROWTH LEAVE REQUEST FORM

This form is to be used by all staff members when requesting approval for attendance at a local, district, state, or national conference. All such requests of \$300 or less are due in the office of the Superintendent at least 10 working days prior to the date of the conference. All requests over \$300 must be made at least two (2) weeks prior to the regularly scheduled board meeting.

1. Local _____ District _____ State _____ National _____ School _____
Name _____ Name of Meeting _____
Sponsor of Mtg. _____ Location of Mtg. _____
Meeting Date(s) _____ Departure Date _____ Return Date _____
A substitute will _____ will not _____ be needed. Date(s) _____

2. What is the purpose of attendance? _____

3. Reimbursement requested from SWPCSC-Taxes and tips are not reimbursable.

Amount
Requested

A. Registration Fee: Attach a copy of the conference program and information regarding registration fees. A. \$ _____

B. Transportation: Record the following to determine requested transportation reimbursement.

Car: Mileage (total miles X \$.~~XX~~) \$ _____

Parking \$ _____

TOTAL (enter under "B") \$ _____

Airplane: *Coach Fare \$ _____

Ground Transportation

(to and from airport) \$ _____

TOTAL (enter under "B") \$ _____

*Include Cost of All airplane fare.

Other: (please Specify)

TOTAL (enter under "B") \$ _____

Total B. \$ _____

C. Lodging:

Single @ \$ _____ X Number of Nights (____) = \$ _____

Double @ \$ _____ X Number of Nights (____) = \$ _____

Total C. \$ _____

D. Meals

Estimated Cost \$ _____

Total D. \$ _____

Grand Total \$ _____

4. _____
Requesting Individual Date

_____ ☐ Approved ☐ Denied
Immediate Supervisor Date

_____ ☐ Approved ☐ Denied
Central Office Administration Date

_____ ☐ Approved ☐ Denied
Board of School Trustees Date