



Rowland Unified School District REQUEST TO ATTEND CONFERENCE (Employee Only)

BOARD APPROVAL
Date: _____
Item #: _____

INSTRUCTIONS

1. Complete all parts of this form and send to Educational Services Division at least two weeks before the Board Meeting scheduled prior to the activity. All conferences submitted should be in alignment with the LEA plan.
2. A memorandum of rationale, signed by the Principal, is required if this request requires ratification (it is not being submitted prior to the activity). If this request is for out-of-state travel or total cost is over \$1,750 per person, conference must be Board approved prior to travel.

ATTENDEE

Employee Attending Conference: _____ Title: _____
 Site: _____ No. of Substitutes: _____

CONVENTION/CONFERENCE/ACTIVITY

Name of Conference: _____
 Date(s): _____ - _____ Location: _____
(Departure Date) (Return Date) (City and State)
 Purpose of Conference: _____
 Created/Requested By: _____ Date Created: _____

ESTIMATED COST AND FUNDING

A. Registration	\$ _____	D. Meals (\$46.50/day)	\$ _____
B. Transp./Mileage (53.5 cents/mile)	\$ _____	E. Substitutes	\$ _____
C. Lodging	\$ _____	F. Other: _____	\$ _____
TOTAL (A.-F.)			\$ _____

Advanced funds are required in the amount of \$ _____. (Must be a minimum of \$50.00, per AR 3350)

Fund	Resource	Goal	Function	Object	Location	Amount
						\$ _____
						\$ _____

REQUIRED SIGNATURES

Approved By: _____ / _____
Department Chair Date

_____/_____
Assistant Principal Date

_____/_____
Principal Date

DISTRICT OFFICE USE ONLY

Signature	Approved	Denied	Date
Program Director _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Asst. Superintendent _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Superintendent* _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

*Superintendent must sign if conference is out-of-state.