PROFESSIONAL MEETING REQUEST & TRAVEL EXPENSE PRE-APPROVAL FORM

EMPLOYEE SECTION rev 10/21

DO NOT REGISTER FOR THIS WORKSHOP/ACTIVITY UNTIL FINAL APPROVAL BY YOUR PRINCIPAL AND/OR TEACHING AND LEARNING

Please complete the following information.

Please complete the ESTIMATED COST in the COST INFORMATION section.

Be sure to attach information regarding the workshop/activity (registration form, brochure,

etc.) Please give this form to your building principal for approval.

Employee	School	
Workshop Title		
Location	Date(s) of Workshop	
Date(s) of Absence	Substitute Required? Yes No	
Employee Signature	Date	

COST INFORMATION

Please see the Business Office Travel Guidelines.

#	Miles	

Estimated Cost				
Substitute	Y N			
Transp.	\$			
Miles	\$			
Lodging	\$			
Meals	\$			
Regist.	\$			
Other	\$			
TOTAL	\$			

Approved Cost					
Substitute	Y N				
Transp.	\$				
Miles	\$				
Lodging	\$				
Meals	\$				
Regist.	\$				
Other	\$				
TOTAL	\$				

Date

Expenditure Approval Acct# Date

PRINCIPAL SECTION

Teaching and Learning

Please complete the following section to approve this absence.

In addition, If you are paying for this workshop with building funds, please complete the

APPROVED COST in the COST INFORMATION section, sign and provide and account number.

Be sure to consider all costs including substitutes.

Once completed, please forward to Teaching and Learning for approval.

Do not process registration until approval has been given.

Absence Initiated By:	Building	Teaching and Learning	Student Services	Employee	
Building Principal Absence Approval			Date		
<u>APPROVAL</u>					