

WEST CENTRAL SCHOOL CORPORATION

117 East Montgomery Street

Francesville, Indiana 47946

Request for authorized attendance at a professional meeting or conference and reimbursement of related expenses.

Complete this form and submit it to the building principal and the superintendent for approval. The signed request will be forwarded to the superintendent for approval and returned to the principal and the originator.

Date

Name of organization, meeting or conference:

Date(s) and place (city):

Employee(s) desiring to attend:

Purpose of attendance:

Substitute teacher(s) required Sub(s) Days

Is use of school vehicle desired:

Estimated expenses:

Registration Fees \$

Travel (55 cents per mile for private vehicle) \$

Lodging _____ night(s) @ _____ per person \$

Other anticipated expenses, if any \$

NOTE: Receipts are required for reimbursement to be made on the above expenses.

APPROVED DISAPPROVED Principal

APPROVED DISAPPROVED Superintendent

Plans for sharing ideas/information with the West Central Staff and Board: