## **Plainville Public Schools**

## **Request for Attendance at Educational Conferences**

- Minimum of one month should be allowed between request and activity/conference
- Prior approval must be secured by your supervisor (Principal/Sped Director)
- Copy of conference notice and purchase order must be attached
- If reimbursement is being requested, information of costs must be submitted
- A report needs to be submitted to the Superintendent within one week of the conference

******	******	******	*****	*********
Name:	ame:		Date:	
Position:		School:		:
Activity or Confere	nce (Name a	and Location):_		
Date(s):		Time(s): _		s):
Purpose of Confer	ence:			
Substitute to be en	nployed?	Yes	☐ No	
Reimbursement Requested?		Yes	Yes No If yes, please complete the following:	
Estimated Cost:	Mileage _		Regist	ration
	Meals		Other _	
******	*****	*******	******	*********
Reviewed and Re	commende	(Principal and/	or Director of Stu	dent Services, Food Service Director, usiness Administrator)
Superintendent Approved:		_Not Approve	d:	Date
Limitations of Ap	proval			
Account No	ccount NoAmount			

Copy to: Employee

**Substitute Coordinator** 

Supervisor of Department (if needed): Principal

**Director of Student Services** 

**Food Service Director** 

**Technology Administrator** 

**Business Administrator**