

Geneseo District #228 Conference/Clinic/Workshop Request

Please complete this form and submit it to your building Principal for consideration and approval.

Your Name _____ Building _____

Type of Conference ☐ Academic ☐ Athletic ☐ Extra Curricular Activity

Are there any other Dist 228 staff members attending? If yes, please list names _____

Conference Name & Location _____

Conference Date(s) _____

Substitute

Will you need a substitute? _____ Yes _____ No

If yes, please specify periods or list "All Day" _____

Additional Coverage Needed? _____ Yes _____ No

Circle/Fill In If Applicable Detention Supervision Lunch Supervision Other _____

Registration

Registration Cost: _____

You will be given a Building Credit Card to register for the conference. Register yourself once the conference is approved by a Building Admin.

Hotel

Will you need hotel reservations? _____ Yes _____ No

If yes, you will be given a Building Credit Card to reserve the hotel. Reserve the hotel yourself once the conference is approved by a Building Admin.

School Vehicle

Do you need to reserve a school vehicle? _____ Yes _____ No

If yes, reserve a school vehicle yourself on the staff portal once the conference is approved by a Building Admin. The credit card can also be used for gas for school vehicles.

Food/M meal \$

Food cannot be charged to the Building Credit Card. You will not be reimbursed for any meals.

Credit Card

Will you need to take a Building Credit Card with you to the conference? _____ Yes _____ No

Employee Signature _____ Date _____

Approved by _____ Date _____

Building Admin Signature

For Office Use Only Budget Code – Sub _____

Budget Code – Registration _____

Budget Code – Travel _____

P-Card Expense Record

Attach receipts to the back of this form. **Receipts for ALL expenses charged must be attached to this form.**

Card Borrower _____
Borrower's Name

Expenses shall not exceed: \$ _____

[illegible]