



**POTOMAC CONFERENCE | Administration**

606 Greenville Avenue, Staunton, VA 24401

Office (540) 886-0771 | Fax (540) 886-5734

http://www.pcsda.org

**CONTINUING EDUCATION  
REQUEST**

Please submit request to the office of the Vice President for Administration, at least 6 weeks before the event.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Church/Department: \_\_\_\_\_

Who will cover during absence: \* \_\_\_\_\_

Class: Class/Seminar Title: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Please check: \_\_\_\_ These dates do not conflict with any other conference event i.e. Pastors' Mtg., LEAD Mtg., Camp Meeting, P/T Convention or any other previously scheduled meeting with conference leadership.

Location: \_\_\_\_\_

(City, State)

Financial: Cost of Class/Seminar \_\_\_\_\_ \$ \_\_\_\_\_

Travel Expense: \_\_\_\_\_ \$ \_\_\_\_\_

(The lesser of .40 per mile or airfare)

Lodging: \_\_\_\_\_ \$ \_\_\_\_\_

Per Diem: \_\_\_\_\_ \$ \_\_\_\_\_

(\$41/day for 2 or more meals; \$20.50/half day)

Materials required for Class/Seminar: \_\_\_\_\_ \$ \_\_\_\_\_

No Reimbursement Requested: \_\_\_\_\_ Total Expenses: \$ \_\_\_\_\_

In Case of Emergency contact: \_\_\_\_\_

\*Senior Pastor/Department Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR ADMINISTRATIVE USE**

\_\_\_\_ Approved

\_\_\_\_ Not Approved

\_\_\_\_\_  
Administrative Officer

\_\_\_\_\_  
Date

Comments: \_\_\_\_\_

\_\_\_\_\_