

# Professional Workshop/Conventions Request Form

FORM 21

School: \_\_\_\_\_

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

Date Submitted: \_\_\_\_\_

Grade/subject area currently teaching: \_\_\_\_\_

Title of workshop/convention: \_\_\_\_\_

Date(s) workshop/convention: \_\_\_\_\_ Location: \_\_\_\_\_

(Reimbursement will only be given up to 6 weeks after date of workshop.)

## Expenses:

Fees: \$ \_\_\_\_\_

Per Diem: \$ \_\_\_\_\_ (\$41.00 per day @ \_\_\_\_\_ days)

Transportation: \$ \_\_\_\_\_ (\_\_\_\_\_ miles @ \$.40 per mile)

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

TOTAL: \$ \_\_\_\_\_

† When did you last attend a workshop/convention where the conference assisted financially?

\_\_\_\_\_

## If approved, according to policy:

### POTOMAC CONFERENCE PAYS:

- ◆ 50% of the teacher's expenses
- ◆ 50% of the substitute teacher's wages

### THE SCHOOL PAYS:

- ◆ 50% of the teacher's expenses
- ◆ 50% of the substitute teacher's wages

**This form must be signed by the school board chairperson before request is made of the Potomac Conference Office of Education.**

**APPROVED**

\_\_\_\_\_  
School Board Chairperson

\_\_\_\_\_  
Date

\_\_\_\_\_  
Superintendent of Schools

\_\_\_\_\_  
Date

11-12