PERSONNEL 03.125 AP.21

Professional Meeting and/or Travel Request Form

Today's Date: 2-7-18

Employee Name: Mallory Dukes
School/Work Location: SLES
Location of Conference/Workshop: (Out of District) Out of State
City, State Location of Conference/Workshop: (Requires Board Approval)
Conference/Workshop Date(s): 2-23-18 Departure Time: Return Time:
Conference/Workshop Name: New Teacher Training Day2
Rationale for Attendance:

Other District Employees Attending Conference/Workshop (Please list name, school/work location and position)
Employee Name: Kayla Wood Location/Position: SLES Preschool TA.
Employee Name: Location/Position:
Employee Name: Location/Position:
Employee Name: Location/Position:

ARE YOU REQUESTING PROFESSIONAL DEVELOPMENT CREDIT? (Yes) No
Credit must be approved by the SBDM and/or Professional Development Coordinator
ARE YOU REQUESTING INSTRUCTIONAL LEADERSHIP CREDIT? Yes (No)
WILL YOU BE PARTICIPATING AS A CONSULTANT? Yes (No)
HOW WILL YOU SHARE INFORMATION GAINED WITH COLLEAGUES?
Share information learned at staff meetings. If handouts are given I will make copies to give to colleagues.

ESTIMATED EXPENSES:

Substance Needed:	YES or NO	No. of Days	Method of Payment:
Registration Fee:	$		Method of Payment:
Use of Board Vehicle:		YES or (NO)	Method of Payment:
Use of Personal Vehicle:		(YES) or NO	Method of Payment:
Mileage	$	No. of Miles 114	
Hotel/Lodging (amount per night)	$	How many nights	Method of Payment:
Meals	$		Method of Payment:
Car Rental (amount per day)	$	How many days	Method of Payment:
Air Fair	$		Method of Payment:

ADDITIONAL INSTRUCTIONS:
* Itemized receipts are required for all expenditures. Receipts for expenses must come from the place of business making the charge.

Signature of Applicant: Mallory Dukes Date 2-7-18
Signature of Principal/Supervisor: Date 2-7-18
Signature of Superintendent/Designee (If Necessary): Date

Review/Revised:7/11/2016

[redacted]

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LIVINGSTON COUNTY SCHOOLS

TRAVEL/MILEAGE EXPENSE FORM

DATE	TO	FROM	Reason for Travel	# OF MILES
2-23-18	Christian Co Head Start	South Livingston Elem.	New Teacher Training.	114

TOTAL MILEAGE 114

CURRENT MILEAGE RATE x.41

TOTAL COST $0.00

$46.74

EMPLOYEE SIGNATURE Mallory Dukes

SUPERVISOR SIGNATURE Becky Dunning