

SAN PASQUAL VALLEY UNIFIED SCHOOL DISTRICT

REQUEST FOR CONFERENCE/VIRTUAL MEETING

Conference Title:	Conference Type: <input type="checkbox"/> In County <input type="checkbox"/> Out of Town <input type="checkbox"/> Zoom
Staff Attending:	
Conference Dates:	Travel Dates:
Location:	

Registration: (Conference materials must be provided)	
Hotel Cost: (including tax) Nights- Rooms Cost- Parking Cost-	
Staff Meals: Breakfast (\$16) Lunch (\$18) Dinner (\$30)	
Same day trips will require meal receipts and a reimbursement form	
Transportation fuel cost per mile Van=\$.70 Bus= \$ 6.50	
Flights	
Shuttle	
Parking / Other additional cost. Additional/overtime pay	
Estimated Total	

Will you use a District Vehicle ☐ Yes ☐ No (If no, mileage, gas or parking will not be reimbursed unless a district vehicle is not available) School Dude Transportation requested date: **Include a copy of school dude submission.**

Will you require a substitute: ☐ Yes ☐ No **if yes, submit lesson plans to office and request coverage to District clerk.**

Signature of Employee: _____ Date: _____

OFFICE USE

☐ Approved

☐ Disapproved

Source of Funding: _____

Principal/Supervisor _____ Date _____

DISTRICT OFFICE USE

☐ Approved

☐ Disapproved

District Office _____ Date _____

Date reviewed by Board _____

☐ Registration Paid

☐ Hotel booked

☐ Air Fare (if applicable)

INSTRUCTIONS: This form is to be completed prior to conference/workshop attendance. Submit all copies to immediate supervisor who will give initial approval and forward all copies to superintendent for final approval. No travel claims, advances, or credit card charges will be paid without submission of this form in advance.

10/14/2015