

# Request to Attend Professional Meeting/Conference Form

**ORIGINATOR INSTRUCTIONS:**

1. Complete all sections. Save form using the following format: Last Name, Date of Conference (Smith 042512).
2. Forward saved file VIA EMAIL to your principal/supervisor requesting approval.

**NOTE:** This request must be submitted for approval two weeks prior to the date of conference (one month prior to the date if overnight accommodations are required). Failure to complete or submit this form on a timely basis may result in the denial of this request.

Today's Date: August 23, 2013  
 Employee Name: Kathleen R. Shirey  
 Home School: Central Administration

Name of Conference: Pennsylvania Fellowship Program for Special Education Leaders  
 Date of Conference: 9/17-18, 10/22, 11/19, 2013, 2/5-7, 3/20, 5/5-6, 7/28-31, 2014  
 Location of Conference: Hershey and Bedford Springs (Last session only)

Brief Description of Conference: 

Fellowship program chosen by the PDE, Bureau of Special Education, and PaTTAN to build knowledge and skills of special education administrators to direct effective programming.

Substitute Required:  Yes  No

Applicable Expense Account Number: 10-2110-580-000-00-20-00-000-00  
 Estimated Expenses: Mileage - Fellowship pays hotel for Hershey dates

**Note: Estimated Expenses include mileage, registration fees, hotel and meal expenses, etc.**  
 If expenses are needed prior to the meeting, please fill out a "Voucher Warrant" requesting an "Advance". "Voucher Warrant" form can be found on the District Website under Employee Forms.

**APPROVAL INSTRUCTIONS:**

1. Place X in appropriate approval box, enter your name and today's date in the space provided, save file.
2. Forward saved file via email to the next administrator. Please forward in the following order:

1. Principal/Supervisor Approval:  Yes  No Kathleen R. Shirey 8/24/13  
 Principal/Supervisor - Name & Date

2. Assistant Superintendent:  Yes  No *Caylon* 8/27/13  
 Assistant Superintendent - Name & Date

3. Superintendent:  Yes  No \_\_\_\_\_  
 Superintendent - Name & Date

4. Board Secretary: \_\_\_\_\_  
 Board Secretary - Name & Date