

RELEASE TIME FOR PROFESSIONAL ACTIVITIES

Name _____

Date of Application _____

I request approval to attend: _____
(Title of Meeting)

To be Held at: _____ Dates _____

Number of School Days? _____ Is substitute needed? Yes No

Last date of release time: _____

SUBSTITUTE INFORMATION

Account to be charged for sub: _____
(your building sub code)

Will Perry general fund be reimbursed? Yes No

Who will reimburse Perry Local? _____
(i.e.: Athletics, Special Ed, Curriculum, SCESC, Local, County, State or Federal Grant, etc.)

Account number to be charged for sub reimbursement: _____

EXPENSE INFORMATION

Account to be charged for other expenses: _____

ESTIMATED EXPENSES

(Please complete prior to meeting)

_____ Travel _____ miles @ \$.30 per mile
Method of travel _____. If more than one person attends a meeting, they are expected to travel together; mileage allowance will be for only one person.

_____ Parking (must be documented with receipt)

_____ Lodging (paid, detailed hotel bill must be furnished)

_____ Meals \$19.00 per day. Receipts must be furnished. Tax/tips will not be reimbursed. **Receipts must be included, not credit card slips or register tapes. Reimbursement applies to overnight trips only.**

_____ Registration Fee – Includes Meals Yes No

_____ Miscellaneous – must be documented

\$ _____ Total amount approved

Signature of Principal/Supervisor

Superintendent's Signature

Date

- All information must be completed before submitting for approval, and a purchase order must be put into the system to cover expenses.
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