

ATTACHMENT G - PROFESSIONAL LEAVE REQUEST FORM

 Print Teacher Name

PROFESSIONAL LEAVE REQUEST FORM

Date _____
 Month Day Year

Signature of Teacher _____

Date of Requested Leave _____
 Month Day Year

A. Purpose and relevance to your teaching assignment _____

Place _____

B. One ore more:

	<u>Check Provision Desired</u>	<u>Provision Granted</u>
1. Substitute	_____	_____
2. Registration Fees \$ _____	_____	_____
3. Travel Allowance:		
a. Car \$.29/mile _____ miles	_____	_____
b. Train* \$ _____	_____	_____
c. Airplane* \$ _____	_____	_____
4. Room Allowance* \$ _____	_____	_____
5. Meal Allowance:		
** a. Breakfast \$5.00 #Meals _____	_____	_____
b. Lunch \$7.00 #Meals _____	_____	_____
c. Dinner \$10.00 #Meals _____	_____	_____

*Receipts required **Overnight stay required

C. Attach registration and copy of agenda of conference with leave form.

D. All costs incurred must be validated and filed with the Treasurer no later than the fifteenth (15th) of the following month after the conference or visitation. Failure to file the cost by the designated date will be cause to not receive payment for expenses incurred.

F. Each teacher granted professional leave must submit a written report within three days after the conclusion of the meeting or conference to the building principal. The reports will be given to the Superintendent for presentation to members of the Board.

Principal Signature

Superintendent Signature

Ref: Article 15