

North Adams Public Schools
Conference Attendance Request

Name: _____ Date: _____

School/Office: _____ Grade/Subject: _____

Conference Title/Subject: _____

Location: _____ Date(s): _____

Is this Conference a Program or Grant Requirement: [] Yes [] No

Expenses: * (Please fill in amounts for each item. Estimate if actual amount is not known.)

Registration Fee: _____

Transportation (.30 x miles): _____

Other (List): _____

Total: _____

Principal's Approval

[] I have funds to pay for this conference. Please charge the following account:

[] I do not have funds to pay for this conference.

Principal's Signature

Date

Grant Funded Conferences

Source of Funding: _____ Account Number: _____

Approved by: _____

Approved: _____
Superintendent

Date

Please Note:

- Registrations for conferences requiring a fee must be handled by Central Office and a completed conference registration form must be attached to this form.
- Registrations for free conferences are the responsibility of the staff member but a Conference Attendance Request must be submitted to Central Office prior to registration.
- Submit any conference invoices you receive to Sharon Davignon.
- After attendance, a Travel Expense Voucher must be submitted in order to receive reimbursement.
- Forms should be submitted to principal, then (if appropriate) grant funding source, then superintendent.

Signature of Staff Member*

Date

*Signature indicates that staff member has read and fully understands the information stated above.

cc: Original to Accounts Payable, Applicant, Superintendent