

Barron Area Schools Staff Development Form

Staff Initiated _____ District Initiated _____ Special Funded Project (please specify) _____

Name _____ (one name per form)

Date of Request _____
Please submit at least two weeks before departure

School _____

Date(s) of Departure _____

Requesting:

Conference _____ Title _____ Location/City _____

Visitation _____ Institution/Program _____ Did you attend this event last year? _____

PRINCIPAL'S SIGNATURE _____ (Must be signed before submitting)

ESTIMATED COST TO DISTRICT

Lodging _____ requisition form must be completed and attached

Mileage _____ currently \$.53.5 – you must use the school Van if it is available or submit claim form for fuel

Sub _____ \$110 for full day/\$55.00 for half day
_____ for ESP, indicate # of hours

Registration _____ attach completed registration

Other _____ parking, food, etc. (\$20.00 food limit per day)

Please Total _____ please estimate your cost and total it

* The estimates will be the maximum allowed.

* Lodging arrangements must be made prior to conference to qualify for tax exempt status.

PLEASE indicate dollar amounts and not check marks for the estimated cost.

Do not register online until you have been approved.

Once you are approved, you will receive an email that is shared with Jill for hiring subs, coding for building secretaries, etc.

____ Approved ____ Denied

____ District Initiated (point system does not apply)

Staff Development Chairperson

RATIONALE FOR REQUEST: Relate specifically HOW this activity will improve you in your job and is not redundant with previous training. THIS MUST BE COMPLETED!