

**PASSAIC PUBLIC SCHOOLS  
PASSAIC, NEW JERSEY  
REQUEST FOR  
ATTENDANCE AT CONFERENCE**

This form is to be submitted to the Office of the Superintendent or Designee at least six (6) weeks prior to conference date.

<b>To:</b>		<b>Name of Principal or Administrator/Supervisor</b>		
<b>From:</b>		<b>Name of Employee (Please Print)</b>		
		<b>Location of Employment</b>		<b>Grade/Subject</b>
<b>I hereby request permission to attend:</b>		<b>Name of Convention, Conference, or Meeting</b>		
<b>Sponsored by:</b>	<b>Name of Sponsor Group</b>		<b>Street Address</b>	<b>City, State, Zip</b>
<b>To be held at:</b>	<b>Name of Conference Site</b>		<b>Street Address</b>	<b>City, State, Zip</b>
<b>On:</b>	<b>Dates of Conference – Please include days of week.</b>			
<b>A substitute will be necessary.</b>			<b>Yes</b>	<b>No</b>
			<b>N/A</b>	

**Estimated Costs (Indicate where Applicable)**

Registration Fee \_\_\_\_\_

Lodging (hotel) - Include Tax \_\_\_\_\_ nights at \_\_\_\_\_ per night \_\_\_\_\_

Is the Conference on the same site as the Hotel? \_\_\_\_\_ **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Meals / Incidentals - Allowable Rates \_\_\_\_\_

Transportation (Mileage) -- Own Car \_\_\_\_\_ miles at \_\_\_\_\_ cents per mile \_\_\_\_\_

Tolls (receipt required) \_\_\_\_\_

Parking (receipt required) \_\_\_\_\_

Other Transportation – Circle one \_\_\_\_\_

Miscellaneous Expenses (explain) \_\_\_\_\_

**TOTAL ESTIMATED COSTS**

Budget Account Number \_\_\_\_\_

**Annual Event** -- If this conference, convention, workshop, etc. is an annual event and you attended event last year, complete the following: 6A:23A-7.5(b.9)

Date of Last Years Event \_\_\_\_\_ Total Cost \_\_\_\_\_ Not Applicable \_\_\_\_\_

**Documentation/Justification – Separate Paper Attachment**

Pursuant to N.J.A.C. 6A:23A-7.5, you shall provide a brief statement that includes the primary purpose of the travel and key issues that will be addressed at the event. *A copy of the travel event agenda, itinerary shall be attached to the request form.*

Approvals	Please circle		Initials	Date
Building Principal	Approved	Not Approved		
Administrator/Supervisor	Approved	Not Approved		
Director of Curriculum & Staff Development	Approved	Not Approved		
Superintendent or Designee	Approved	Not Approved		

**Board Resolution required** - Approved by Board of Education?

**Certification by Employee**

I certify that the information provided in this document is accurate to the best of my knowledge. I have also read and understood the *Administrative Rules for Employee Travel* issued by the school district.

<b>Employee Signature</b>	<b>Date</b>