

HARVEY PUBLIC SCHOOLS DISTRICT 152

CONFERENCE/CONVENTION/WORKSHOP ATTENDANCE REQUEST

Please submit one copy of any information you may have concerning this request at least TWO WEEKS BEFORE requested C/C/W date(s).

Name of Person (please print): Siriana Thomas

Grade/Subject/School: District Office

Name/Date of C/C/W: Sept. 5 - Sept. 8

Location of C/C/W: Nevada

Give a tentative summary of expected expenses(s):

Registration:	\$ <u>899.00</u>
Travel:	\$ <u>239.00</u>
Food:	\$ _____
Lodging:	\$ <u>169. /night</u>
Other:	\$ _____
Estimated Total:	\$ _____

Will a substitute be required? Yes ___ No ___ All Day? Yes ___ No ___ AM ___ PM ___

LONG RANGE PLAN ___ GOAL ___ Explain what you desire to gain by attendance:

Knowledge of H.R. laws and common practical

Siriana Thomas 5/7/18
Applicant's Sig/Date

Principal's Sig/Date

Lela G. Bridges
Administrator's Sig/Date

NOTE: IF APPROVED, A WRITTEN REPORT MUST BE SUBMITTED TO SUPERINTENDENT OR ADMINISTRATOR WITHIN ONE WEEK AFTER THE CONFERENCE/CONVENTION/WORKSHOP.

OFFICE USE ONLY

APPROVED _____ DATE _____ DISAPPROVED _____ DATE _____

Account Name & Number: _____

PO # _____ CHECK REQUEST: Accounts Payable _____ Payroll _____ Imprest _____

Substitute Account Name/Number: _____

Name of Substitute Called: _____

Margaret 5/10/18
Business Manager Signature/Date

Lela G. Bridges
Superintendent's Signature/Date



September 5-7, 2018

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AN INVITATION FROM MODERATOR DAN KAPLAN...

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02:14

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