

ADMINISTRATIVE Pre-Approval for Conference/Meeting (Overnight)

| Employee: Dr. Kimberly A. Nasshan | Position: | Superintendent |
|--|-------------------|--------------------|
| Conference/Mtg.: Urban Superintendents Summer Academy | y '18 Location: | Louisville, KY |
| Conference/Mtg. Dates (from): 07/10/18 | (to): | 07/15/18 |
| Dates absent from work (from): 07/10/18 | (to): | 07/13/18 |
| Maximum ESTIMATES of expenses for which employee will request reimbursement: | | |
| TRAVEL (estimated) | | |
| Plane, bus, or train fare | | |
| Special fares for bus and taxi Click on this url to search current rate and fill in | | |
| Auto Mileage: Miles x ra (calculate from District address starting point) Results of the control of | te: | 0.00_ |
| • Parking: Day(s) x ra | te: | |
| Submit receipt for hotel or motel bill (estimated) | | - |
| Tips (includes Red Caps/Porters, Bellhops, etc.) | | - |
| MEALS | | |
| Maximum (per GSA) per day is authorized for meals | | |
| REGISTRATION FEES | | |
| MISCELLANEOUS CONFERENCE EXPENSES, PLEASE IT | EMIZE: | (|
| Fee for USAA 2018 Summer Academy | | 425.00 |
| | | |
| | | |
| Budget Code: 10.0.2320.312.00.0000.00 | tal Estimate of E | Expenses: \$425.00 |
| Superintendent or Designee Approved: | | |
| Please submit TWO copies | | |

One will be returned and should be resubmitted when actual conference expenses have been finalized.

ALSO, please attach a brief summary about the purpose of attending this conference/meeting and how it will enhance the educational environment for students.