



**BROWNING PUBLIC SCHOOLS**  
**Leave Report/Travel Request**

Employee Name Sample Request  
 Building \_\_\_\_\_

Employee # \_\_\_\_\_  
 Substitute Name \_\_\_\_\_

**LEAVE REPORT**

<u>Date of Leave</u>	<u>Hours</u>	<u>Type of Leave</u>
<u>July 24 2022</u>	<u>4 Hrs</u>	<u>School Related</u>
<u>July 25-27, 2022</u>	<u>24 Hrs</u>	<u>School Related</u>

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

**Approved; Condition upon the specific leave being available for the specific employee**       **Not Approved**

Principal/Supervisor \_\_\_\_\_ Date \_\_\_\_\_

**TYPE OF LEAVE**

- |  |                                    |                               |
|--|------------------------------------|-------------------------------|
| AN Annual                              | PL Personal Leave                  | ALWO Approved Leave W/O Pay   |
| SL Sick Leave                          | JD Jury Duty (attach verification) | ULWO Unapproved Leave w/o Pay |
| *EX/SR Extra-Curricular/School Related | NG National Guard                  | SWP Suspended w/Pay           |
|  | FN Funeral _____                   | SWOP Suspended w/o Pay        |
- (Master Contract Relationship)*

**\*If taking School Related/Extra-Curricular Leave only, In or Out of District, you MUST list Conference Name/Location**

**TRAVEL REQUEST** (If receiving payment for EX/SR leave please fill out entire form completely)

Conference/Workshop SAM Administrators Institute 2022 (Attach Brochure/Agenda)

Location Helena, Mt.

Departure Date July 24, 2022

Return Date July 27, 2022

Departure Time 2:00

Return Time 5:00 p.m.

Transportation:     Personal Vehicle  
 District Vehicle  
 Professional Development

Mileage 344/2 x .585 = \$ 100.62  
 Per Diem 3 days/1Meal@\$35/1 = \$ 120.00

**Registration** PO# \_\_\_\_\_ = \$ 300.00  
 **Hotel** PO# \_\_\_\_\_ = \$ 616.86  
 **Other** PO# Airfare = \$ 0.00  
 **Other** PO# Luggage = \$ 0.00

**Sub Total \$1137.48**

Budget 115.90.787.2213.582.634 (100%) \$220.62  
 \_\_\_\_\_ ( \_\_\_\_\_ %)

**Check Total \$220.62**

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal/Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Superintendent Signature \_\_\_\_\_ Date \_\_\_\_\_