FOREST AREA SCHOOL DISTRICT (Revised 2/2022)

CONFERENCE/WORKSHOP REQUEST FORM

NAME_____ Assignment_____

Building_____ Dates_____

Activity_____ Location_____

Substitute(s) Cost @ $150.15 - Teacher $150.15 - Nurse	$_____
Registration Fee	$_____
Mileage_____Miles x .58.5 per mile	$_____
Meals ($20.00 per day limit)	$_____
Room	$_____
Other (Tools, Parking, etc.)	$_____
TOTAL	$_____

Which of the following pertain to this particular conference/workshop?

Seven Staff Development Categories

_____ Act 48
_____ Content Knowledge
_____ General Teaching Knowledge
_____ Curriculum Knowledge
_____ Content Knowledge
_____ Knowledge of Educational Context
_____ Knowledge of Educational Ends

Funds for conference/workshop are from (Check one)

_____ District Funds
_____ Title I Funds
_____ Title II Funds
_____ Title II ___ Funds
_____ Title V Funds
_____ Drug-Free Schools
_____ Other_____

Upon your return, how do you expect to use, apply or disseminate the information you will receive? _____

_____
_____
_____

List any special project funds, which can be used for this conference/workshop. _____
_____

Building Principal's Signature_____
(Board Approval Required)

Superintendent's Signature:_____