

MAPLETON PUBLIC SCHOOLS  
ADAMS COUNTY SCHOOL DISTRICT 1

File: GCI-E-1

Request for Conference Attendance Approval  
(Attach any registration materials)

Date: \_\_\_\_\_

Name \_\_\_\_\_ School/Dept. \_\_\_\_\_

**CONFERENCE INFORMATION:**

Name of Conference \_\_\_\_\_ Sponsor \_\_\_\_\_

Are you a member? \_\_\_\_\_ Location (City) \_\_\_\_\_ State \_\_\_\_\_

Inclusive

Hotel/Motel \_\_\_\_\_ Conf. Dates: Beginning \_\_\_\_\_ Ending \_\_\_\_\_

Responsibilities at Conference: \_\_\_\_\_

**TRAVEL/ABSENCE INFORMATION:**

Total School Days: \_\_\_\_\_ Additional Time  
Needed for Travel: (dates) \_\_\_\_\_

Substitute Needed: (Dates) \_\_\_\_\_

**ESTIMATED EXPENSES:**

Transportation: 1. AIR or AUTO = \_\_\_ MILES X \$ \_\_\_\_\_ per mile.... \$ \_\_\_\_\_

2. To/from Hotel..... \$ \_\_\_\_\_

3. Rental Car ..... \$ \_\_\_\_\_

Per Diem: \_\_\_\_\_ days @ \$ \_\_\_\_\_ per day..... \$ \_\_\_\_\_

Lodging \_\_\_\_\_ nights @ \$ \_\_\_\_\_ per night..... \$ \_\_\_\_\_

Conference Registration:..... \$ \_\_\_\_\_

Miscellaneous Expenses (identify) \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL EXPENSES:..... \$ \_\_\_\_\_

Budget Source: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

**APPROVAL:**

Comments \_\_\_\_\_

\_\_\_\_\_  
Supervisor's signature (signature recommends approval)

\_\_\_\_\_  
Superintendent's signature