

PROFESSIONAL DEVELOPMENT PRE-APPROVAL REQUEST

Name of Workshop/Training/Conference: _____

Type of PD: _____ In District _____ Out of District but In State _____ Out of State _____ Shoebox Registration

Date of PD: _____ / _____ / _____
Month Date Year

Day: S M T W Th F S

Is this a contract day? _____ yes _____ no

Is this a student contact day? _____ yes _____ no

Time: _____ to _____ Number of PD hours requested: _____ Description of PD attached: _____

Location of Training: _____ Name of Instructor: _____

Description of Training: _____

Number of Subs _____ Person(s) Attending: _____

Funding:

_____ **Alternate Funding** Complete and attach the alternate funds request form found on the pd webpage. Send funding form with this preapproval to the appropriate CAO director for alternate budget approval) . _____ Alternate Funding Approved

_____ **Building Funding:** _____ no funds needed _____ attendee will pay _____ building fund

Administrator's signature below indicates approval of professional development and compliance with all funding guidelines for expenditures from building funds. Substitutes are the responsibility of the building administrator.

Total Amount Requested: _____ **Building Fund Category:** _____

(check applicable expenditures)

_____ Conference Fee	_____ Mileage	Dates of Travel: to: _____ return: _____
_____ Meals	_____ Airfare	
_____ Hotel	_____ Other _____	

Person Submitting Request / Date

Principal/Supervisor Signature / Date

Submit form and attachments to CAO in time for approval PRIOR to the event. Failure for prior approval may result in no professional development credit being awarded.

CAO/PD Review: Original at CAO: _____ Copy to Principal: _____ Copy to Alternate Funding: _____

Approved _____ **Disapproved** _____ **Incomplete information/Resubmit:** _____

_____ Approved: building principal or CAO facilitator responsible for sign in sheets, documentation of attendance with a copy of the preapproval form and final product (if applicable). Teacher posts credit to Shoebox.

_____ **Sign in Sheet required** **Preapproval Number:** _____

Submitted sign in sheet to CAO for final PD credit to be granted with paper documentation. Teacher will post in Shoebox.

Shoebox number: _____ **Register electronic / presenter prints sign in sheets and returns to CAO:Payne.**

PD credit is posted electronically to the teacher's Shoebox. No other documentation required.

_____ Approved: Non District Provider-attendee is responsible for attaching documentation of attendance from provider to a copy of this form and posting credit to Shoebox

_____ Request for out of state/out of country travel Superintendent: _____

CAO/PD Administrator

Date