



**C.O.O.R.**  
INTERMEDIATE  
SCHOOL DISTRICT

# Request for Approval: Conference/Workshop/Meeting

Attach a copy of the conference background information and registration form to this request. When checks are required for Prepay Expenses, the request must be submitted to the accounting department **two weeks prior to due date.**

## Pre- Conference Information

Revised 1-15-24 rs

Name: \_\_\_\_\_ Date submitted: \_\_\_\_\_

Conference / Event Title: \_\_\_\_\_

Location: \_\_\_\_\_ Dates: \_\_\_\_\_

	Fees	Payable To	check	credit card
Registration	\$ _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Lodging	\$ _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Est. Meals	\$ _____			
Est. Mileage	_____ round trip miles			

OR  using COOR car/ carpooling

	/			\$ _____
<b>Employee Signature</b>		Date		Total

Approval to Attend the above is:  **GRANTED** or  **DENIED**

	/			
Department Head		Date	Superintendent	Date

Accounting Code: \_\_\_\_\_

## Post-Conference/Additional Expenses from Conference/Workshop/Meeting:

Maximum Meal Reimbursement  
if NOT included in conference:  
\$10 breakfast \$15 Lunch  
\$30 Dinner, 20% tips

Lodging \_\_\_\_\_

Meals \_\_\_\_\_ Attach detailed Receipts. See note above.

Travel \_\_\_\_\_ miles X \$0.67 = \_\_\_\_\_

Other \_\_\_\_\_ Attach Receipts & Describe reason

	/	
<b>Employee Signature</b>		<b>Date</b>

	/	
Department Head		Date

Balance Due Employee: \$ \_\_\_\_\_