



## Request for Conference Attendance Procedure

1. All conference requests need to be submitted in time to go through the process.
2. If there is a conference that requires a fee (except the sub cost), the teacher needs to immediately send an e-mail to the Business Official with details about the conference and cost. **NOTE:** This does not guarantee approval, but starts the process if you are approved.
3. The building principal must sign the form first if he/she supports the request.
4. The form needs to go to the administrator in charge of the PD Committee. **NOTE:** PDC meets the first Thursday of the month.
5. If the PDC supports the request, they will sign off on it with exactly what they recommend to be paid.
6. It then goes to the superintendent for his/her approval.
7. Until and if the teacher gets the signed conference request form back with the superintendent's signature, he/she may not assume they are approved. When approved, he/she may sign up.
8. Teachers must present a brief summary of the conference at their next building faculty meeting as a condition of attendance.



## Duanesburg Central School District Request for Conference Attendance

2017-18

(updated 6/5/17)

Directions: Please submit a Requisition Form attached to this form, to your building Principal for approval, one month prior to the conference date.

Name: \_\_\_\_\_ Location: \_\_\_\_\_ Date(s): \_\_\_\_\_

Conference: \_\_\_\_\_ Cost: \_\_\_\_\_

Name of Organization/Person Providing the CTLE Training: \_\_\_\_\_ Sponsor ID # \_\_\_\_\_

Will you be paid or offered any honorarium, stipend, etc. by the trainer/organization to attend?

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please specify: \_\_\_\_\_

**HS** - Please list number of classes you have missed for each period this year:

Period: 1: \_\_\_\_\_ 2: \_\_\_\_\_ 3: \_\_\_\_\_ 4: \_\_\_\_\_ 5: \_\_\_\_\_ 6: \_\_\_\_\_ 7: \_\_\_\_\_ 8: \_\_\_\_\_

**ES** - Please list number of days out of class to date: \_\_\_\_\_

How does this conference relate to your pedagogy, content, ELL or the mission and goals of DCS?

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Principal Signature \_\_\_\_\_ Superintendent Signature \_\_\_\_\_

Reviewed by PDC on \_\_\_\_\_ Approved \_\_\_\_\_ Declined \_\_\_\_\_



## Conference Report Form

Directions: Please submit this form to your building Principal after attending your conference.

Name: \_\_\_\_\_ Conference: \_\_\_\_\_

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

Significant ideas, information, and/or procedures discussed at this conference:

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This information would be appropriate to share with:

All staff/Faculty: Yes                      No

Members of the HS \_\_\_\_\_ Department

Members of the ES \_\_\_\_\_ Grade Level Team(s)

Other: \_\_\_\_\_