

TAYLORVILLE COMMUNITY UNIT SCHOOLS  
APPLICATION FOR ATTENDANCE AT PROFESSIONAL MEETINGS

Date \_\_\_\_\_

NAME OF APPLICANT \_\_\_\_\_

SCHOOL \_\_\_\_\_

DATE(S) OF MEETING \_\_\_\_\_

MEETING \_\_\_\_\_

LOCATION (CITY) \_\_\_\_\_

SPONSORING COMPANY OR AGENCY \_\_\_\_\_

(Click One) I \_\_\_ AM, \_\_\_ AM NOT a dues paying member of the sponsoring organization.

PURPOSE (Please indicate the general purpose of the meeting and your particular reasons for attending.)

ESTIMATED EXPENSES (Itemize): Registration Fee \_\_\_\_\_ Transportation \_\_\_\_\_  
Meals \_\_\_\_\_ Lodging \_\_\_\_\_ Other \_\_\_\_\_

Expense Allowance from any other organization \_\_\_\_\_

RECORD OF PAST INSERVICE ATTENDANCE (Please indicate the name, place, and approximate date of the last conference you attended.) \_\_\_\_\_

Signed \_\_\_\_\_

This request is approved in accordance with the provisions for attendance at professional meetings.

Date \_\_\_\_\_ Principal \_\_\_\_\_

Date \_\_\_\_\_ Superintendent \_\_\_\_\_

Designated Funding:

Block Grant \_\_\_\_\_ Tech \_\_\_\_\_ Title I \_\_\_\_\_ Title II \_\_\_\_\_ Title IV \_\_\_\_\_ Gifted \_\_\_\_\_ PREP \_\_\_\_\_

Elem. Mile \_\_\_\_\_ Jr. High Mile \_\_\_\_\_ Sr. High Mile \_\_\_\_\_ Principal Mile \_\_\_\_\_ Other \_\_\_\_\_

Disapproved \_\_\_\_\_ Date \_\_\_\_\_