



Genesee Education Consultant Services

Tracking Number: \_\_\_\_\_

**CONFERENCE/STAFF DEVELOPMENT/MEETING REQUEST**

Name \_\_\_\_\_ Date \_\_\_\_\_

Employee Email \_\_\_\_\_ District/Dept./Program \_\_\_\_\_  
(Required for Confirmation)

Name of Activity \_\_\_\_\_

Date(s) \_\_\_\_\_ Location \_\_\_\_\_ Time \_\_\_\_\_  
(City) (State) (Time needing to be at conference)

Educational Plan: Please complete the Educational Plan area on this form. If available, please attach a copy of the program announcement for the activity. If in need of travel/hotel accommodations please complete the additional request form.

**Estimated Expenses:**

	<u>Amount</u>	<u>GECS USE</u>
Registration Fee	\$ _____	INV# _____
Hotel Accommodations	\$ _____	INV# _____
Travel Accommodations	\$ _____	INV# _____
Meals (overnight only)	\$ _____	
Car-Miles _____	\$ _____	
Car Pooling <input type="checkbox"/> Y <input type="checkbox"/> N		
Other _____	\$ _____	
_____	\$ _____	
<b>Total Estimate*</b>	_____	

**Approval/Disapproval Action:**

Immediate Supervisor	Approved _____
Date	Disapproved _____
Department Head	Approved _____
Date	Disapproved _____
Superintendent	Approved _____
Date	Disapproved _____

\*Expenditures not pre-approved and costs exceeding the approved request may not be reimbursed. All requests for reimbursement, along with receipts, are due to the Department Head within 14 days of conference attendance.

**Please check all that apply:**

☐ Grant Requirement
 ☐ Grant Funded
 ☐ Conference Presenter
 ☐ Professional Development  
☐ Certification Requirement
 ☐ Professional Association Responsibility
 ☐ Award Recipient  
☐ Other (please explain) \_\_\_\_\_

**Meal Allowance Maximum:**

Breakfast: \$ 13.00	Account/P.O. Number _____
Lunch: \$ 15.00	Department Contact _____
Dinner: \$ 26.00	Dept. Contact Email Address(es) _____

(Email notification will be sent to Dept. Contact and employee)

Approved weekend conference expenses will be paid.

Wages are generally not paid on weekend conference attendance.

**Educational Plan:****Plan for dissemination or utilization of information to appropriate staff members/constituents:**