CONFERENCE-WORKSHOP-MEETING FORM

Please turn this form in at least two weeks prior to conference, workshop, or meeting.

Name _____ Date (turned in) _____

Title of Event _____

Location of Event _____

Funding – Account Number/Project _____

Registration Fee $_____   Already Registered: Yes _____   No _____

     Attach paperwork with details, contact person(s), phone and fax numbers.

Lodging (cost per night) $_____List Block name/number or reduced rate_____

 Number of nights _____ Total Cost $ _____

Already made: Yes_____ No_____ If yes, and holding with your credit card, you will be taking a school check for payment

    *Before leaving, please pick up a school check for hotel payment or tax exempt form if payment on school credit card.

Date(s) of Lodging: Check In _____ Check Out _____

Hotel Name _____

Hotel Address _____

Hotel's Phone number _____

Hotel's Fax number _____

School Vehicle _____ (fill out transportation request form)

Personal Vehicle (**IF** school vehicle isn't available) _____

    Mileage (Estimated Cost IRS rate) $ _____

    *Food (Estimated Total) $_____   Breakfast - $7   Lunch - $8   Dinner - $15

*Attach receipts to _back_ of check request form for reimbursement

TOTAL ESTIMATED COST $_____

Approved By _____ Date _____

*Remember to fill out an Absentee Report Form IF a sub is needed (Separate "purple" form.)