

Request to Attend Conference / Meeting

THIS FORM MUST BE COMPLETED AND APPROVED BEFORE REGISTERING FOR THE CONFERENCE/WORKSHOP.

Individual Attending Dan Sensewig
Name of Conference PMEA District Band Festival
Location of Conference Mountorsville High School
Date(s) 2/9+10/2023 Days of Week Thurs + Fri

Are you an active member of the organization sponsoring this event?

Yes No

Is this conference directly related to a classroom assignment?

Yes No

Purpose of conference:

This is District Band with 2 students. The information learned is brought back and shared w/ the other band members. We frequently play some of these songs + I learn a lot at the sessions, meetings, + observation opportunities provided.

Number of school days absent for conference/meeting:

2

Total number of days requested for conference/meeting:

2 (include travel time)

Estimated time of departure:

7:30 am

Estimated time of return:

9 pm

COMPLETE THE FOLLOWING ESTIMATIONS OF EXPENSES:

Travel: mileage reimbursement
Lodging: 0
Meals: 3 - not specified yet if mine are included
Registration: 180
Other: _____

Total Estimated Expenditures: approx \$0.00 180 plus mileage + sub

SUBSTITUTE NEEDED:

Yes (of Days) 2
 No

**All receipts must be itemized.
Tips are not reimbursable.**

Submitted by:

Daniel S. Sensewig

Date: 11/21/22

Recommended to Superintendent:

Yes No

Principal Signature

Account # _____

Amount/% _____

Account # _____

Amount/% _____

Recommended to School Board for Approval:

Adrian R. H.

Superintendent Signature

Date Approved by School Board: _____

Distribution:

Original - District Office

Copy 1 - Teacher

Copy 2 - Building Office

Attach 14-2E-2