

Wellsboro Area School District
227 Nichols Street
Wellsboro, PA 16901

Request to Attend Conference / Meeting

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

Individual Attending Jennifer Erway
Name of Conference Educator Workshop in Cuba
Location of Conference Havana, Cuba
Date(s) 4/21/23-4/29/23 Days of Week Sat.-Sat. (plus Fri. for travel)

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:

The purpose of this workshop is to earn 3 recertification credits by learning about Cuba's educational system. This is an extraordinary opportunity, as travel to Cuba is generally restricted by our government. We will visit elementary, middle/secondary classrooms, & a special education school. We will also observe arts education, visit the University of Havana, and go to the Literacy Campaign Museum. Pre-trip readings will also be completed for discussions while in Cuba.

Number of school days absent for conference/meeting: 6 total
Total number of days requested for conference/meeting: 6 (1 travel, 5 conf. (include travel time))

Estimated time of departure: 4/21 AM
Estimated time of return: 4/30 AM

COMPLETE THE FOLLOWING ESTIMATIONS OF EXPENSES:

Travel: \$914.25
Lodging: \$400.00
Meals: \$220.00
Registration: \$2,050.00
Other: \$1,008.00
Total Estimated Expenditures: \$4,592.25

SUBSTITUTE NEEDED:
 Yes (# of Days) 6 (\$1,008)
 No

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

Submitted by: Jennifer Erway Date: 1/18/2023

Recommended to Superintendent: Yes No
Principal Signature: [Signature]
Account # _____ Amount/% _____
Account # _____ Amount/% _____

Recommended to School Board for Approval: [Signature]
Superintendent Signature

Date Approved by School Board: _____

Distribution: Original - District Office Copy 1 - Teacher Copy 2 - Building Office