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 Daniel Long Name of Conference AP Calculus AB and BC (combined) - APSI Online @ W	/illiam & Mary	
Location of Conference Online	y	
Date(s) June 25th, 2024 - June 28th, 2024 Days of Week		
Are you an active member of the organization sponsoring this event?	O Yes No	
Is this conference directly related to a classroom assignment?	Yes O No	
Purpose of conference:		
Training for teaching AP Calculus AB (Note registraiion fee increases to 700	after May 3rd)	
Number of school days absent for conference/meeting: 0		
Total number of days requested for conference/meeting: 0	(include travel time)	
Estimated time of departure: n/a		
Estimated time of return: n/a		
COMPLETE THE FOLLOWING ESTIMATIONS OF EXPENSES:	SUBSTITUTE NEEDED:	
Travel:	O Yes (# of Days)	
Lodging:	-	
Meals:	■ No	
Registration: \$600.00		
Other:	All receipts must be itemized.	
Total Estimated Expenditures: \$600.00	Tips are not reimbursable.	
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Submitted by:	Date:	
Recommended to Superintendent: O Yes O No		
necommended to Superintendent.	Principal Signature	
Account #	Amount/%	
Account #	Amount/%	
Description of the state of the		
Recommended to School Board for Approval:	Superintendent Signature	
Date Approved by School Board:		
Distribution: ☐ Original - District Office ☐ Copy 1 - Teacher	☐ Copy 2 - Building Office	