

Northeastern Catholic District School Board

REQUEST TO ATTEND A WORKSHOP / IN-SERVICE / CONFERENCE / COMMITTEE MEETING

Name of Activity: _____

Date of Activity: _____ a.m. p.m. all day

Location of Activity: _____

Attending in person: _____ Attending by v/c: _____

Name of School:			
Name of Participant	Grade	Name of Participant	Grade

EXPENSES		ACCOUNT #
RELEASE	# of supply teachers: _____ X # of days: _____	
ACCOMMODATION	- number of nights	
TRANSPORTATION	- rental (name of driver)	
- using own vehicle (✓) subject to approval		
MEALS		
REGISTRATION FEE		

Principal's Approval: _____

REQUEST: APPROVED _____ DENIED _____

Conditions: _____

Approval: _____ _____

Superintendent of Education/Designate
Date

- 1 - THE ACTIVITY MUST BE DIRECTLY RELATED TO YOUR WORK.
- 2 - YOU MUST BE READY TO REPORT TO OTHERS THE KNOWLEDGE OBTAINED.
ADMINISTRATION MAY ASK FOR A WRITTEN REPORT.
- 3 - EACH DELEGATE MUST SUBMIT A STATEMENT OF EXPENDITURES AFTER THE ACTIVITY.

Please forward to the **SUPERINTENDENT OF EDUCATION/DESIGNATE at the Timmins Board Office.**