

LIVINGSTON PARISH PUBLIC SCHOOLS REQUEST TO ATTEND CONFERENCE

All employees must complete and submit a Request to Attend Conference prior to registration and before any travel arrangements are made. Please allow at least two weeks for this approval process.

Name of Attendee:					
School or Department:					
Name of Conference:					
Dates of Conference:					
Type of Conference:	State	Regional		National	
Registration Expenses:					
Lodging Expenses:					
Transportation Expenses:					
Meal Expenses:					
Funding Source:					
All expenses will be based of	on guidelines listed in tl	he LPPS Travel I	Regulations.		
What is the purpose for attend	ding this conference?				
What evidence will be seen th	at the information				
gained will be used in your dai					
school level?					
What is your redelivery time for	rame?				
How will follow up to the scho	ol(s) or district take				
place?					
Regulations and Standard of Personal Conduct. Employee Signature:		Date:			
Approvals must be granted ar	d signed in the following	order. Final app	roval granted pend	ing funding source.	
		Арр	roval Granted	Denied	
1.Superintendent/Asst Name:	•				
2.Direct Supervisor Name:					
3.Funding Source Supe					