

Westport Central School District

FOR	OFFICE USE
#	

REQUEST FOR APPROVAL OF CONFERENCE ATTENDANCE AND/OR TRAVEL

INSTRUCTION Submit completes	<u>S</u> : I form to your Administrator/Supervisor	at least (30) THIRTY DAYS pr	for to date of travel if possible.		
•	Staff Conference or MeetingLocal Student Field Trip:NOvernight and/or Out-of-State StuSubstitute Needed (Specify Dates)	umber of Staff (Staff members codent Field Trip	annot incur any expenses)		
Name:	Destination:				
	Last First				
Purpose of Tri	p/Conference/Meeting:		Departure Time:		
Date(s) From:	(Date)	(Date)	Departure Time:		
	(Dute)				
rume or crass	•				
	CIPATED EXPENDITURES BELOW		FOR OFFICE USE		
Meals (Item Registration Reimbursabl Transportation Other – Spec TOTAL EST LESS AMO	tel Name	ed): P.O. # MILES @ <u>\$. /mile</u> ent) B/ACTIVITY	\$ \$		
Signature:			Date:		
		RED DOCUMENTS ARE	ATTACHED		
61			Data		
Signature:	Superintendent of S	chools	_ Date:		