

Somersworth Staff Development Request for Funding

SAU 56 Somersworth (Mileage subject to change)

Staff Member: _____ School: _____

Activity: _____

Location: _____ Date: _____

FUNDING REQUEST

1. Registration Fees _____

2. Transportation _____ miles at \$.56/mile
(Mileage may change each year) _____

3. Meals up to \$10.00 per day _____

4. Other Expenses – 50% of these may be reimbursed

Lodging _____

Other (specify) _____

TOTAL REQUEST FOR FUNDING _____

Signature _____ Date _____

Must be approved by BLC before submitting: Yes: _____ No: _____

BLC Signature: _____

Date _____

Superintendent/Business Administrator

Approved: _____ Yes: _____ No: _____

RECEIPTS FOR ALL EXPENSES MUST BE SUBMITTED WITH THIS REQUEST

January 2013

SAU #56
PROFESSIONAL DEVELOPMENT ACTIVITY
SELF-REFLECTION

Activity: _____ Date: _____

What did I learn?

How will I use this information with students or in my current position?

Is there anything further that I need?