

**OCEAN CITY PUBLIC SCHOOLS
PROFESSIONAL LEAVE REQUEST**

Name: _____ Position: _____

Primary School Intermediate School High School District Office

Date Submitted (Must be Submitted 2 Weeks Prior to Leave) _____

Request to Attend: _____

Conference/Workshop Title	Location	Date
Expenses Itemized:		Substitute Needed:
Registration _____		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
Mileage: _____ mi @ .47/mi. _____		Dates: _____
Tolls _____		
Lodging (Outside NJ only) _____		
Meals (Overnight Travel only) _____		
Total Expenses:	\$ _____	

Special Notes:

1. Complete the Professional Leave Request eight weeks prior to the date of the conference.
2. Attach any descriptive literature, brochures, or announcements relative to the conference/workshop, hotel name and means of transportation to this form.
3. Include all expenses as reimbursement cannot exceed the Board of Education approved amount.
4. Submit the Professional Leave Request to the building principal or supervisor.
5. Submit the Professional Leave Conference Report and your Professional Leave Expense Report within two weeks of attending the conference/workshop.
6. Attach all receipts for expense reimbursements to the Professional Leave Expense Report.
7. Read and comply with District Travel Rules located on the Staff Resources section of the district website.

Staff Member: Please state how this conference/workshop will address the instructional needs or further the efficient operation of the school district: _____

Preliminary Approval/Denial:

Director/Supervisor: _____ Approval Denial Date _____

Principal: _____ Approval Denial Date _____

Second Level Approval/Denial:

Business Administrator: _____ Approval Denial Date _____

Superintendent of School Approval/Denial:

Superintendent of Schools: _____ Approval Denial Date _____

Board of Education Approval/Denial:

Date of Board Meeting: _____ Approval Denial Date _____

Comments: _____