

Approval Request for Out-of- State Professional Development or Other Travel Using Federal Funds

Professional Development
(complete pages 1 & 2)

← **CHECK ONE** →

Other Travel (complete page 1
with signatures)

What Federal Funds Program Will Be Used for Travel:	
District:	LEA:
Address:	
City:	Zip Code:
Contact Person:	Title:
Phone Number:	Ext.:
School (within LEA) Requesting PD:	
<i>Employee(s) or Number of Student(s)</i>	<i>Title of Employee or Grade Level of Students</i>
1.	
2	
3.	
Conference Name (attach brochure):	
Purpose of Conference:	
Destination City:	Destination State:
Departure Date:	Return Date:
<u>Estimated Expenses (per diem)</u> <u>Per Diem Rates</u>	
Registration/Person = _____ x Number of People = Total:	Airfare/Person _____ x Number of People = Total:
Mileage Reimbursement/Person _____ x (per diem) x Number People = Total:	
Lodging/Person = _____ x Number of People = Total:	Meals/Person = _____ x Number of People = Total:
*Identify Other Expenses/Person: _____ x Number of People = Total:	*Explain other expenses:
Total Estimated Expenses for all Persons Listed Above:	

Answer questions 1-5 for out of state PD only; however, **both** PD travel and other travel require both signatures below.

1. How does this PD align within state standards?	
2. How does this PD align with the LEA's "needs assessment" with focus on low-income minority students?	
3. Is this PD job-embedded (how will this improve the quality and effectiveness of teachers, principals, and other school leaders)?	
4. Is this PD evidence based and how will LEA follow up to ensure improvement in student academic performance?	
5. How will LEA evaluate & provide evidence of the effectiveness of this PD and who will provide the on-going implementation of PD within the LEA?	
<div> <div>Federal Program Coordinator Signature:</div> <div>Date:</div> </div>	
<div> <div>Superintendent Signature:</div> <div>Date:</div> </div>	