

**A**lexander **C**ounty **S**chools  
Administrative Leave Request Form

**TECHNOLOGY WORKSHOP**  **WORKSHOP THAT INCLUDES SOME TECHNOLOGY**

**NAME** \_\_\_\_\_ **TITLE** \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date(s) of Leave: \_\_\_\_\_

Title of Program, Conference, Workshop: \_\_\_\_\_

Location (City, State) \_\_\_\_\_ Estimated Mileage (for reimbursement) \_\_\_\_\_

Estimated Cost For Lodging and Meals \_\_\_\_\_ (Receipt must be attached when claiming reimbursement.)

Registration Amount: \_\_\_\_\_ **Source of Funds:** \_\_\_\_\_

**REGISTRATION  
INCLUDES:**

Meals (specify) \_\_\_\_\_

Materials (specify) \_\_\_\_\_

Other (specify) \_\_\_\_\_

**JUSTIFICATION:** If the registration fee is more than \$50, a written statement must be completed. This statement should justify the expenditure by relating the in-service to the specific school/program need. Justification not required for costs of \$50 or less.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SUBMITTED BY \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ (Superintendent/Designee)

**SUBMIT ONE WEEK IN ADVANCE OF LEAVE.**  
Your approved Leave Request Form must be attached to your reimbursement request.

This instrument has been preaudited in the manner required by the school budget and fiscal control act.

CODE: TRAVEL AND SUBSISTENCE

\_\_\_\_\_  
FINANCE DIRECTOR