

Indian Trails Professional Development Request

Name _____ Date _____

Name/Title of activity _____ Date of activity _____

Location of activity _____

Expenses	Maximum Allowable Expenses
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Registration _____	\$ _____
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Travel Method _____ (Flight receipt or Mileage)	\$ _____
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Lodging # _____ of Nights @ _____ \$ _____ (Not to exceed conference Hotel Rate)	\$ _____
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Misc: Baggage, parking, tolls, substitute teacher pay, etc. \$ _____

- To qualify for PD Activity you must have an active advisory committee and be current on meetings with minutes submitted.
- Mileage will be calculated from your high school address, not your home address. Mileage will be paid up to the cost of an airline ticket. You will need to submit a mileage claim form.
- Annual Program Evaluation up to date and submitted.
- Itemized receipts required for all expenses.
- Written trip report is a summary of sessions attended and how you could utilize the information. This must be presented with your itemized receipts, otherwise you will not be reimbursed until we receive written summary.
- Most expenses are to be paid by the individual: Indian Trails will then reimburse you.
- If the individual does not attend, the individual is expected to reimburse Indian Trails any monies they have paid out.

Building Principal Signature

CTE Director Signature

Date

Date

Please have your Building Principal sign and date and then return this form to Cris at cspangler@twinlakes.k12.in.us