## WARREN COUNTY SCHOOL DISTRICT Warren, Pennsylvania 16365

## REQUEST TO ATTEND CONFERENCES, MEETINGS, WORKSHOPS

| Clark  | William                                  |                      | 0                             |
|--|--|----------------------|-------------------------------|
| Last   | First                                    | Building/School      |                               |
| 2/5/15<br>Date                                     | Superintendent Work Assignment/Title     | Curriculum/          | Department                    |
| Dale   | MOUV TOOREMINETIN LITTE                  | Curroutuilly.        | - opariment                   |
| Organization Sponsoring Meeting:                   | PARS                                     | S                    |                               |
| Location of Meeting:                               | State College, PA<br>(City, State, Site) | Date/Time            | e: Apr. 22-24, 2015           |
| Purpose for attending meeting and descriptio       |  | eting notification): |                               |
| Annual PA Rural and Small Schools Confere          | nce                                      |                      |                               |
|  |  |                      |                               |
|  |  |                      |                               |
| District Goal/Strategic Plan Goal or Buildi        | ing Goal supported by attendance         | e to this event:     |                               |
|  |  |                      |                               |
| Number of <b>School</b> days required for meeting. |  | Required:            |                               |
| Number of <b>Total</b> days required for meeting:  | 2  | Elective:            |                               |
| -  |  |                      |                               |
| ESTIMATED EXPENSES:                                | y  |                      | ę 1000                        |
| Transportation: 239.8 miles a                      |  |                      | \$ 136.69<br>\$ 60.00         |
|  |  |                      |                               |
|  |  |                      | \$ <u>180.00</u><br>\$ 199.00 |
|  |  |                      | \$ 199.00                     |
| Other (Specify):                                   |  | <del></del>          | \$                            |
| ·· (~F4)).   |  |                      | \$ 575.69                     |
|  | _  |                      |                               |
| Number of Substitute Days Required:                |  |                      |                               |
| Budget Unit Number & Account Number:               | umber: 01-2360-000-00-3                  |                      | [                             |
|  |  |                      |                               |
|  | OFFICE USE ONLY                          |                      |                               |
| Signatures of Approval:                            |  |                      |                               |
| Building Principal:                                | [  | □Yes □No             | Date:                         |
| Superintendent/Director:                           | Γ  | □Yes □No             | Date:                         |