

**HARDYSTON TOWNSHIP PUBLIC SCHOOLS
PROFESSIONAL DEVELOPMENT/CONFERENCE REQUEST**

PROCEDURE:

1. COMPLETE REQUEST FORM **WITH REQUIRED DOCUMENTATION ATTACHED**, & SUBMIT TO BUILDING ADMINISTRATOR FOR APPROVAL.
2. **THE BOARD OFFICE IS RESPONSIBLE FOR REGISTRATION AFTER APPROVAL. ALL REGISTRATION INFORMATION MUST BE PROVIDED TO AVOID A DELAY IN PROCESSING YOUR REQUEST.**
3. AFTER CONFERENCE: SUBMIT PROOF AND AFTER CONFERENCE/WORKSHOP FORM TO BUSINESS OFFICE TO REQUEST MILEAGE REIMBURSEMENT.

NAME: _____

NAME OF CONFERENCE: _____

*(Please attach **ALL** information regarding the conference or workshop **AND** registration information.)*

LOCATION: _____ DATE S): _____

Describe the benefit of this conference/workshop for the students in our school or district?

Registration Fee \$ _____

Estimated "Roundtrip" Mileage: _____ miles
@ \$.47 per mile

Other Expenses \$ _____

Explain Other Expenses: _____

Total Estimated Expenses \$ _____

Staff's Signature _____

Date: _____

____ Approved

____ Denied

Building Administrator's Signature: _____

Date: _____

Superintendent's Signature: _____

Date: _____

Business Administrator's Signature: _____

Date: _____

Board of Education Approval Date: _____

No reimbursement for meals unless an overnight stay is required. Reimbursement cannot be completed without prior approval of the CSA and Board of Education (Board Policy 6471 – School District Travel).

****PLEASE NOTE THAT REQUEST FORMS WITH ANY MISSING INFORMATION WILL BE RETURNED BY THE BOARD OFFICE AND MAY CAUSE A DELAY IN REGISTRATION.****

**HARDYSTON TOWNSHIP PUBLIC SCHOOLS
AFTER CONFERENCE/WORKSHOP/WEBINAR FORM**

****PLEASE COMPLETE SECTIONS ONE AND TWO****

SECTION ONE:

Name: _____

Name of Conference/workshop/webinar: _____

Date(s) attended: _____

Location: _____

What did I learn from Conference/Workshop/Webinar?

How will I use what I have learned?

Any other information you would like to share or attach, please do so.

SECTION TWO: TRAVEL REIMBURSEMENT (if applicable, please attach the following items):

_____ Proof of attendance (certificate, CEU credits, agenda, or name badge)

_____ Mileage to and from (check one) ☐ Middle School ☐ Elementary School
@NJ OMB rate - \$.47 per mile ☐ Home if shorter distance

_____ Copy of Mapquest or Google Maps to show mileage

_____ **Unredacted** copy of driver's license and auto insurance

_____ Proof of expenses (copy of cancelled check, credit card statement, or invoice)

VENDOR DECLARATION: I do solemnly declare and certify that under the penalties of the law that the within bill is correct in all its particulars; that the goods or services itemized in the above have been delivered or rendered; that no bonus has been given or received by any person or persons within the knowledge of the above claim; and that the same is correct and true, and the amount therein stated is justly due and owing and that amount charged is a reasonable one.

Signature: _____ Date: _____

NO REIMBURSEMENT WITHOUT ALL MATERIALS RECEIVED

**Please submit to the Business Office as soon as possible
upon return from the conference/workshop.**

Revised 3/23