

**REQUEST TO ATTEND A CONFERENCE
TRAVEL AUTHORITY
ITHACA CITY SCHOOL DISTRICT**

1. **Name:** _____ **Today's Date:** _____ **(Submit 30 days prior to event)**

2. **Position and School:** _____

3. **Name of Conference:** _____

4. **Location and date(s) of Conference:** _____

5. **Conference Fee(s):** \$ _____ **Did you pay the conference fee(s)?** YES NO

6. **Have you registered?** YES **Include your confirmation information and any proof of payment if you've paid.**
NO **Include a filled out registration form and event brochure**

7. **Estimate of transportation:** \$ _____ **Include a point to point online mapping tool printout for mileage reimbursement.**
Method of travel Own Car Riding w/ other staff Other
You must submit a flight confirmation including payment confirmation if you've booked a flight.

*Please visit <http://www.gsa.gov/portal/category/100120> for all Maximum reimbursement rates

9. **Estimate of housing:** Event must be at least 75 miles away \$ _____ **Submit reservation confirmations.**
**You must make your own flight and/or hotel reservations

10. **Estimate of meals:** \$ _____ **KEEP ALL YOUR ITEMIZED RECEIPTS**

Total Cost of Trip: \$ _____

APPROVALS: _____ **Signature** _____ **Date:** _____ **Budget Code:** _____ **Max Authorized Payment:** _____

Building Principal: _____ **\$** _____

Or

Supervisor/Dept. Head: _____ **\$** _____

Or

Superintendent: _____ **\$** _____

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Please briefly explain how attending this conference will assist you in working toward one or more of the following goals:

- ICSD Board of Education/District Goals for this year
- Your building School Development Plan goals
- Your individual professional goals

Please describe any additional benefits from attending this conference:

Describe how you will share the information you received from attending this conference. Please be specific about the audience and the means of sharing:

Signature of Applicant: _____

Building Assignment: _____

Submit to Marta in the Business Office with all supporting documents, signatures and budget codes. Question? Please contact marta.costapott@icsd.k12.ny.us 607-274-2121