

# Wood County Special Education Shared Services

## Mineola Independent School District

1000 West Loop

Mineola, TX 75773

Office: 903-569-2448

Fax: 903-569-5155

### Workshop/Seminar Request Form

Date: \_\_\_\_\_ Attendee: \_\_\_\_\_

The employee named above requests permission to attend the workshop/seminar as described:

Workshop Title: \_\_\_\_\_

Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Mode of Transportation: \_\_\_\_\_

E.T./D.D. MISD \_\_\_\_\_ E.T./D.R. MISD \_\_\_\_\_

Shared Transportation Arrangement: \_\_\_\_\_

Shared Lodging Arrangements: \_\_\_\_\_

Estimated Costs: (Actual receipts required for reimbursement)

Registration Fee (Association dues and insurance is not eligible) \$ \_\_\_\_\_

Lodging \$ \_\_\_\_\_  
( \_\_\_\_\_ nights @ \$ \_\_\_\_\_ ) ( \_\_\_\_\_ persons per room)

#### Meal (s)

Breakfast: \_\_\_\_\_ @ \$7.50 = \$ \_\_\_\_\_

Lunch \_\_\_\_\_ @ 10.00 = \$ \_\_\_\_\_

Dinner \_\_\_\_\_ @ 15.00 = \$ \_\_\_\_\_

**TOTAL MEALS** \$ \_\_\_\_\_

Substitute Costs: \_\_\_\_\_ days @ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Mileage Request: \_\_\_\_\_ miles @ .53 per mile \$ \_\_\_\_\_

Other Costs (Specify) \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL EXPENDITURES** \$ \_\_\_\_\_

Attendance is:  Approved  Denied \_\_\_\_\_ Initials

\_\_\_\_\_  
Immediate Supervisor Signature

\_\_\_\_\_  
Staff Development Coordinator Signature

\_\_\_\_\_  
Business Manager Signature

\_\_\_\_\_  
Superintendent Signature

Note: See Back of this page for Schedule of Allowable costs

The employee initiating this request will complete one form and submit for approval to the Staff Development Coordinator. The request will then go to the Immediate Supervisor and on to the Central Office. Approval or denial will be indicated on this form and a copy returned to the employee. A copy of this form, with all expenditures receipts accompanied by a request for reimbursement, must be submitted to the business office for documentation upon return from the seminar.

#### SCHEDULE OF ALLOWABLE COSTS:

Maximum for lodging is \$85. Per night per person. (to exceed this amount, specific and prior permission will be necessary).

Maximum for meals is \$7.50 for breakfast, \$10.00 for lunch, and \$15.00 for dinner.

Those employees wishing to make application for Compensatory Time must attach the following documents:

- Formal written request for Compensatory Time.
- Agenda of meetings that will be attended.
- Written synopsis of meeting content
- Proposed compensatory date (s)
- Written explanation of how attendance at this seminar will benefit the students in your area at MISD

NOTE: Association dues, personal insurance, or other miscellaneous services added into the "fee Schedule" are not eligible as school expense. The employee must defray the cost of these items individually.