

Neenah Joint School District

Out-of-Building/Classroom Request Form

Please complete this form at least 2 weeks prior to event.

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| STEP 1: COMPLETED BY ATTENDEE | <p>NAME: _____ DATE OF REQUEST: _____</p> <p>BUILDING/SCHOOL(S): _____ ASSIGNMENT: _____</p> <p>REASON FOR EVENT: _____</p> <p>DATE(S) OF EVENT: _____ LOCATION OF EVENT: _____</p> <p>SUBSTITUTE NEEDED: <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, <input type="checkbox"/> FULL DAY <input type="checkbox"/> HALF-DAY AM <input type="checkbox"/> HALF-DAY PM</p> <p>NAME OF <u>PRE-ARRANGED</u> SUBSTITUTE: _____ <input type="checkbox"/> CUSTOM: _____</p> <p>_____</p> <p style="text-align: right; font-size: small;">(If you travel to more than one building, please indicate where your substitute should report and provide specific hours.)</p> <p>REGISTRATION INFORMATION: You are responsible for registration after administrator approval has been received. Please submit reimbursement request to the Business Office after attending event.</p> |
| STEP 2: COMPLETED BY ATTENDEE/ADMINISTRATOR/DESIGNEE | <p>ESTIMATED COST TO DISTRICT:</p> <p>REGISTRATION \$ _____ ACCOUNT # _____</p> <p>SUBSTITUTE COST \$ _____ ACCOUNT # _____</p> <p>MILEAGE (Use current rate) \$ _____ ACCOUNT # _____</p> <p>MEALS \$ _____ ACCOUNT # _____</p> <p>LODGING \$ _____ ACCOUNT # _____</p> <p>OTHER \$ _____ ACCOUNT # _____</p> <p>(Airfare, taxi, parking, tolls, etc.)</p> <p>ESTIMATED TOTAL COST: \$ _____</p> |
| STEP 3: BUILDING ADMINISTRATOR | <p style="text-align: center;"><u>SELECT ONE CATEGORY TO ACCOUNT FOR DAYS USED:</u></p> <p style="text-align: center;"> <input type="checkbox"/> Title IIA <input type="checkbox"/> Discretionary <input type="checkbox"/> C.I.A. <input type="checkbox"/> Pupil Services <input type="checkbox"/> Technology <input type="checkbox"/> District </p> <hr/> <p><input type="checkbox"/> RECOMMENDED FOR APPROVAL BY: _____</p> <p style="text-align: right; margin-left: 400px;">(Building Principal or Supervisor)</p> <p><input type="checkbox"/> REQUEST DENIED</p> |
| STEP 4: DISTRICT ADMINISTRATOR | <p><input type="checkbox"/> REQUEST APPROVED WITH FULL/PARTIAL EXPENSES</p> <p><input type="checkbox"/> REQUEST APPROVED WITHOUT EXPENSES</p> <p><input type="checkbox"/> REQUEST DENIED</p> <p style="text-align: right; margin-right: 100px;">BY: _____</p> <p style="text-align: right;">(District Administrator or Designee)</p> |