

HINGHAM PUBLIC SCHOOLS

EDUCATOR WORKSHOP/CONFERENCE REQUEST AND REIMBURSEMENT FORM

Instructions: For pre-approval, please complete this form at least 10 days prior to the workshop/conference and attach a description of the workshop. Then submit both to your principal/director. The Principal/Director will then sign and forward the original to the Assistant Superintendent of Schools. Once action is taken the form will be returned to the educator requesting the reimbursement. After the workshop/conference please complete Section II, forward to your Principal/Director for signature. The Principal/Director will then sign and forward the original to the Assistant Superintendent of Schools who will take action and submit to the finance office for processing.

SECTION I - PRE-APPROVAL			
Name:		Today's Date:	
School/Department:		Date of Workshop:	
Workshop Title:			
ESTIMATED COSTS		CHARGE TO (office use only):	
Registration Fee: <small>(attach form)</small>	\$	Account Number:	
Substitute Needed?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Account Number:	

☐ Recommended ☐ Not Recommended
 ☐ Recommended ☐ Not Recommended

 Principal/Director Date Assistant Superintendent Date

****** STOP HERE - ONLY COMPLETE SECTION II WHEN SUBMITTING REIMBURSEMENT ******

SECTION II - REIMBURSEMENT REQUEST			
Actual Cost:		Total Amount Requested:	
Signature: _____		Date: _____	
<p><small>*This section must be completed and submitted no more than 60 days following the workshop. Please submit (1) Proof of Payment (cash: receipt stating paid in full; check: copy of both sides of cancelled check; credit card: copy of statement showing purchase) and (2) proof of attendance (PDP certificate, agenda, etc.).</small></p>			

☐ Recommended ☐ Not Recommended
 ☐ Recommended ☐ Not Recommended

 Principal/Director Date Assistant Superintendent Date