

**IRONTON CITY SCHOOLS  
ATTENDANCE REQUEST FOR EDUCATIONAL MEETINGS  
WORKSHOPS OR CONFERENCES**

**APPLICATION MUST BE SUBMITTED AT LEAST FIVE DAYS PRIOR TO MEETING DATE**

Name of meeting: \_\_\_\_\_

Location of meeting: \_\_\_\_\_

Date(s) of meeting: \_\_\_\_\_

Educational purpose: \_\_\_\_\_

\_\_\_\_\_

Sponsoring agency: \_\_\_\_\_

List anticipated line item expenses if such is to be considered for payment by the Ironton City Board of Education. Indicate "0" if no expenses are to be incurred. PLEASE NOTE: A purchase order number must be assigned prior to incurring any expenses related to this request.

Travel _____ (\$ .555 per mile)	\$ _____	
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Meals _____ (\$7. Breakfast; \$9. Lunch; \$16. Dinner)	\$ _____	
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Lodging _____	\$ _____	_____ (Lodging Payable To)
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Incidentals _____	\$ _____	
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Registration Fees	\$ _____	_____ (Registration Payable To)
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TOTAL	\$ _____	
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Do you want the Central Office to mail the registration form?     Yes     No

Please contact Deanna Martin at 532-3950 (W) or 532-8162 (H) if a substitute will be necessary to cover in your absence.

Receipts for expenses incurred must be submitted within thirty (30) days of the conclusion of the meeting.

Date of application: _____	_____
	Signature of Applicant

Action Taken:	_____
_____	_____
	Signature of Principal/Supervisor <span style="float: right;">Date</span>

_____	_____
	Signature of Assistant Superintendent <span style="float: right;">Date</span>

Fund: \_\_\_\_\_