



Professional Development (Out of District) Request Form

All applications should be received four (4) weeks prior to the requested dates if travel arrangements are required and at least two (2) weeks if no arrangements are required . Please refer to the guidelines listed on the back.

Application for Professional Leave Cancellation of Previous Request Field Trip Request Consultant Request

Name as it appears on state ID : _____ Date: _____

School/Dept.: _____ Grade/Subject: _____

Meeting Name: _____ Date(s): _____ Location: _____

Will you receive compensation for attending this PD? Yes No If yes, how much?

A Copy of the Program Brochure Must be Attached
Refer to Professional Development Travel Guideline on the District Website

PROFESSIONAL LEAVE ESTIMATED EXPENSES

Substitute Cost: _____	Substitute Required?*	NO	YES
Registration Fee: _____	Other	remember to report absence to AESOP.	
Consultant Fee: _____	(#) _____ of Full days x \$129.00=	_____	
Consultant Name: _____	(#) _____ of Half days x \$64.50 =	_____	
Attach W9	-----INCLUDES BENEFITS COSTS-----		
Lodging: _____	_____ of Nights x _____ \$	_____	
Meals: _____	*rate includes tax	_____	
Transportation: _____	I will share a room	I will room alone and pay half of room expense	
Total Estimated Expenses: _____	Meal expenses may not Exceed \$40.00 per day. <i>Itemized receipts required</i>		
	_____ of miles x \$0.56 per mile=	\$ _____	
	Airfare \$ _____	Luggage	\$ _____
	Parking \$ _____	Taxi/Shuttle	\$ _____
	Other fee \$ _____	Total	\$ _____
	Flight preference: _____		
	day _____ evening _____ date _____		

I Have Read and Agree to the Conditions as Stated on this form, and Agree to Pay all Non-re fundable costs if I cancel my attendance and a Suitable Replacement Cannot be Found.

Applicant's Signature/Date: _____

FOR SUPERVISOR OR PRINCIPAL USE ONLY

RECOMMENDATION: Approve as Requested Approve Partially Denied

COMMENTS: _____

Requested Funding Source: (List grant/fund name and complete coding(fund, func.,obj., spcc., and opu.)

Grant: _____

General: _____ Special request :

Other: _____

SUPERVISOR'S/PRINCIPAL'S SIGNATURE and DATE: _____

FOR ASSISTANT SUPERINTENDENT/EDUCATIONAL SERVICES USE ONLY

RECOMMENDATION: Approve as Requested Approve Partially Denied

Comments: _____

Signature _____ Date _____

HIGHLY QUALIFIED PROFESSIONAL DEVELOPMENT REQUEST FORM

Professional development request should meet the goals of the District. This packet outlines each goal and the objectives. You must provide a detailed description for each goal in the provided sections.

When and to whom should I submit my application?

Professional Development (Out of District) Request Forms must be filled out, signed, and submitted to the immediate supervisor or principal for approval at least 4 weeks prior to the dates of leave if travel accommodations are needed. Professional Development not requiring accommodations must be submitted at least two (2) weeks prior to request. At this time you must also fill out any and all requisitions for the expenses associated with the leave. The Professional Development Request form must then be signed by the **Assistant Superintendent or designee** at the Board of Education for approval. No further action is necessary until approval is granted. If arrangements are not made prior to approval you will be responsible for all costs incurred.

What else should I do in preparation?

Upon the Assistant Superintendent's approval, the professional leave should be reported to AESOP/Frontline (800) 942-3767 if the leave occurs during school/work time.

How do I cancel my request for professional leave?

Notify your immediate supervisor and the Human Resources Dept. if a substitute Resubmit the professional development form and check the box at the top marked "**cancellation of previous request**" and cancel your absence in AESOP. If expenses are incurred due to cancellation you will be responsible for those expenses if you do not have good reason for cancelling such as death in family or medical emergency for yourself or immediate family.

What documentation is required to be reimbursed for expenses?

Within two (2) weeks attending the Professional Development leave, you must complete the **Expense Account Form**. **If you fail to submit your Expense Account Form within the two (2) weeks, the Purchase Order will be closed and you will not be reimbursed.** Attach all pertinent documentation of the professional leave expenses: copies of registration certification, itemized receipts (originals), and a copy of the hotel bill (folio). Submit to the Budget Manager who will submit paperwork to the Finance Department for reimbursement. If you are receiving compensation, please submit a Payment for Extra Assignment Form (individual or group), which is located on the website under staff tab labeled forms.

The payment for extra assignment sheet must be submitted no later than one week after the return date of the professional development and must be accompanied by an agenda for the PD attended.

What expenses are covered?

Only **meals** (breakfast, lunch, and dinner) consumed outside the Greater Cleveland Metropolitan area during professional leave (\$40 per day limit), registration fees, lodging (**room and tax will be prepaid by BOE**), mileage, parking (**\$10 per diem max**), airfare (**prepaid by BOE**), luggage (**\$25 each way max**) and transportation service to and from airports and to and from hotels to conference if not held on-site are covered. If you choose to drive instead of flying you will receive no more than the cost of the flight and gas purchases are not reimbursed. **Rental cars must be preapproved by the Asst. Superintendent or designee prior to reservation. A one time fuel purchase will be reimbursed for rental cars.**

What expenses are not covered?

Employees will not be reimbursed for in-room movies, phone service, snacks, tips, or alcoholic beverages. For this reason, itemized receipts are required. Staff development dollars may not be used to purchase individual memberships to professional organizations, membership fees, or CEU's. Any expenditure not named on the application will not be covered. Additional unexpected expenses incurred during the leave must be resubmitted for approval by the Board.

What further documentation is expected upon my return?

In addition to documentation of expenses, a brief 1-2 page summary highlighting what was learned, how that knowledge will be applied, and the employee's evaluation of the content and presentation of the meeting must be submitted to your immediate supervisor and placed in the professional development Google Drive.

Please refer to the professional development travel guidelines on the District website.

Provide a brief description of this HQPD as it relates to the Ohio Professional Development Standards and the Districts Strategic Goals

Standard 1: Learning Communities

Standard 2: Leadership

Standard 3: Resources

Standard 4: Data

Standard 5: Learning Designs

Standard 6: Implementation

Standard 7: Outcomes

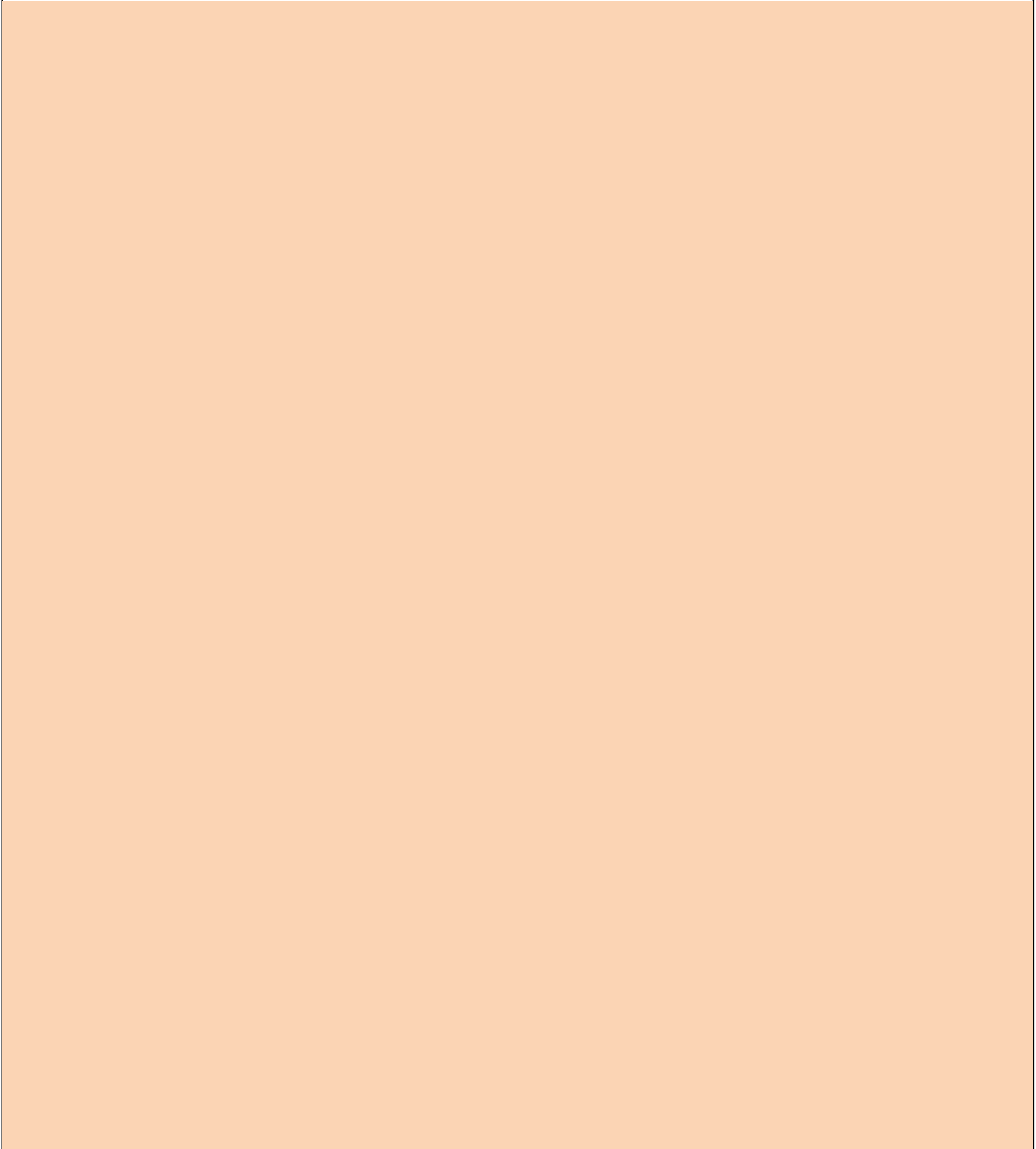
Goal 1: Student Outcomes, Expectations and School Mastery

Goal 2: Educational Approach Equity, empowerment, Opportunities

Goal 3: Parents, Community, Engagement Partnerships, Communication

Goal 4: Valued Professionals and Culture of Excellence

Goal 5: Operational Resources



Professional Development Summary Report

Name: _____

Date: _____

Name of Professional Development: _____

What information was gained from attending this PD?

How will the information from the conference be applied?

How would you rate the conference based on content and presentation?

Additional information: