



**Catoosa County Schools
Request for Individual Professional Learning Funding and/or Leave Funding
Reimbursement of Registration Fee(s) PL Form 1**

All forms must be processed before leave is taken by the employee. Reimbursement of registration fee(s) and payment for the substitute will occur upon completion of PL Attendance Form (Form 2) or other attendance verification within 30 days of activity.

Person requesting leave: _____ Munis No.: _____

School: _____ Position: _____

Activity: _____

Date(s): _____ Location: _____

Registration Deadline: _____

Contact hours for PLU credit _____ (must be in 10 hour increments)

Please check one below: (A copy of the registration and the agenda or program must be attached.)

- FIELD OF CERTIFICATION
- DISTRICT/SCHOOL PROFESSIONAL LEARNING PLAN
- ANNUAL PERSONNEL EVALUATION
- STATE/FEDERAL REQUIREMENTS

If District/School Professional Learning Plan is checked, explain the alignment of this activity with either of these plans. _____

Registration Fee **Reimbursement:** Yes No Amount of Registration: \$ _____

(School can pay for registration and receive reimbursement from Professional Learning.)

Source of Funds: School Professional Learning Allotment
 System Professional Learning Allotment
 Other: _____ (Signature of administrator for this fund)

Required Signatures:

Supervisor's Approval

Date

Professional Learning Coordinator Approval

Date