Hardy County Schools

Professional Leave Form

All requests for professional leave must be submitted **TWO WEKS** prior to the meeting date. All requests must include the name of the funding source that will be paying for the travel. The approval of the school principal, as well as, the project director must be included on this form. You will receive a copy of this request when approved or disapproved.

I	_request p	orofessional leave o	n the follo	owing date(s))		
to attend		at					
I will be absent from my duties at	Number of days requested						
Substitute Necessary ☐ Yes ☐ No Subs	stitute's Na	ame					
Estimated cost Princ	cipal's App	roval					
Staff Member's Signature			Dat	:e			
•••••	•••••	••••••	•••••	•••••	•••••	••••••	
THIS SECTION	ТО ВЕ СО	MPLETED BY PROJ	ECT DIREC	TOR			
Funding source (i.e., Vocational, CTE, Staff De	ev.)						
Project code				Appro	oved 🗆 I	Disapproved	
Project Director's Signature				D	ate		
	TRA VE	L EXPENSE	S		Other	T	
Destination From	Miles	Transportation Cost	Meals	Lodging	Other	Total	
TOTALS→							
**I hereby certify that the above expenses ar				•	nal travel.		
**If expenses are incurred, return this form v	vitn receip	its attached to the p	oroject dir	ector.			
Staff Member's Signature			Date	e			
Director's Signature	rector's Signature Date						