

PLR# \_\_\_\_\_

WEST JEFFERSON SCHOOL DISTRICT #253  
**PROFESSIONAL LEAVE REQUEST**

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Name of Employee(s) Requesting Leave: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of Proposed Travel: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Location: \_\_\_\_\_

Purpose of Leave: *(Please print name of conference or other reason for request. Attach any registration forms or flyers.)*

Description of Planned Activities: *(Attach agenda, if available)*

How does planned activity relate to your present assignment?

How will the students of West Jefferson School District directly benefit from this professional leave?

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**Complete funding information on next page PRIOR to getting approvals below.**

Approval by Building Principal \_\_\_\_\_ Date \_\_\_\_\_

Approval by Superintendent \_\_\_\_\_ Date \_\_\_\_\_

Funding Approval \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** This form is simply a “Professional Leave Request” and must be **approved prior** to any expenditure. If you have any questions concerning the information requested, contact the District Office.

PLR# \_\_\_\_\_

### FUNDING INFORMATION

**LODGING:**

**REQUEST Government Tax exempt rate under West Jefferson School District #253**

Hotel Choice \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Telephone \_\_\_\_\_  
Confirmation # \_\_\_\_\_

\_\_\_\_\_ # of nights x \$\_\_\_\_\_ per room x \_\_\_\_\_ # of rooms = Lodging Total  
Reservation(s) under name(s): \_\_\_\_\_  
\_\_\_\_\_

**Lodging Total** \$

- Check all that apply
- I do not need Lodging.
  - I have already made reservation(s)
  - Direct Bill
  - District to confirm with CCard
  - Pay with CCard at event
  
  - District will make the reservations and payment arrangements.
  
  - Other \_\_\_\_\_

**MEALS:**

**DO NOT REQUEST reimbursement for meals provided at hotel, meeting, or conference**

\$7.00 x \_\_\_\_\_ # Breakfast (must leave before 8:00 am) x \_\_\_\_\_ # Staff = \$ \_\_\_\_\_  
\$8.00 x \_\_\_\_\_ # Lunch x \_\_\_\_\_ # Staff = \$ \_\_\_\_\_  
\$15.00 x \_\_\_\_\_ # Dinner (must leave before 5:00 pm) x \_\_\_\_\_ # Staff = \$ \_\_\_\_\_

(An OverNight Stay qualifies per diem TOTAL (allowance is \$30.00/day) \$ \_\_\_\_\_

√ **Attach agenda showing meals provided**

**Meal Total** \$

- Per Diem not needed
- Per Diem - pay after event
- Per Diem - pay before event

*NOTE: To process per diem prior to the event, please deliver this form to the District Office **two (2) weeks** or more in advance.*

**TRAVEL:**

- Air Travel**
- Travel in School Bus** (School Bus Request must be submitted) \_\_\_\_\_ # of students \_\_\_\_\_ # of Adults
- Travel in School District vehicle**  Car \_\_\_\_\_ # of Adults  Van \_\_\_\_\_ # of Adults
- Travel in personal vehicle** - A mileage reimbursement with signed AP voucher form must be submitted to the District Office for personal vehicle reimbursement. Reimbursement for Personal vehicle only as follows:  
District Car **not** Available - Number of miles \_\_\_\_\_ @ \$.485 = \$ \_\_\_\_\_  
Or  
District Car **was** available - Number of miles \_\_\_\_\_ @ \$.20 = \$ \_\_\_\_\_

**Travel Total** \$

Departure Date \_\_\_\_\_  
Departure Time \_\_\_\_\_  
  
Return Date \_\_\_\_\_  
Return Time \_\_\_\_\_

**REGISTRATION:** (attach registration form, if available)

Name of Organization \_\_\_\_\_  
Address \_\_\_\_\_  
City, state, Zip \_\_\_\_\_  
Telephone \_\_\_\_\_

Number of individuals \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

**Registration Total** \$

- Check all that apply
- Yes, Registration form is attached
  - I have already registered
  - Bill coming
  - Pay with CCard at event
  - District Office will register & pay

**FUNDING:**

- Terreton Elementary Travel (100-512380)
- Hamer Elementary Travel (100-512380-101)
- WJ Junior High Travel (100-515-380-602)
- WJ High School Travel (100-515380)
- Athletic Travel (100-531380)
- Curricular Activity Travel (100-532380)
- School Board Travel (100-631380)
- District Admin Travel (100-632380)
  
- District Car Travel (100-682380)
- Vocational Travel (243-519380-\_\_\_\_\_)
- High Desert Travel (263-621380-\_\_\_\_\_)
- Title I Travel (251-621380)
- Migrant Travel (253-512380)
- Title VI-B Travel (257-521380)
- Quality Teacher Travel (271-621380)
- Other \_\_\_\_\_

**Total Estimated Cost of Professional Leave** \$ \_\_\_\_\_