PIERZ SCHOOLS
WORKSHOP REQUEST FORM

DATE: _____   **Registration Deadline Date**: _____

Workshop Date: _____

NAME OF CONFERENCE/WORKSHOP ATTENDING: _____
  (*attach information*)
MAKE CHECK PAYABLE TO: _____

MAIL TO: _____
                    _____
                    _____

Requested by: _____   _____

			Total	
Registration Fee	_____ @	$ _____	$_____*	*Attach completed registration form.*
Sub(s) needed	_____ @	$ ___130.00___	$_____	
Lodging	____/nights @	$_____	$_____	

 *Dates of Lodging   arrive __/__/__   depart __/__/__
         (**Complete & attach lodging information if necessary.*)

Transportation   Requested ____yes____no
Mileage   _____ miles @ $___.60_____ $_____
                     (*only if no school vehicle available*)
Meals   _____ @ $_____ $_____

TOTAL $ _____

I have already registered _____YES _____NO. I have already booked my lodging _____YES _____NO.

Comment on this opportunity, how you will apply this to your curriculum and/or position and explain how you will share your experience.
_____
_____
_____

(office use only)
ADMINISTRATIVE CONFIRMATION

_____
Building Administrator   Date

_____   PO#: _____
Business Manager   Date

Code _____   Voucher Amount $ _____

Code _____