

CRANSTON PUBLIC SCHOOLS CONFERENCE

REQUEST GUIDELINES

All conference requests must go to the building principal, program director, Executive Director of Pupil Personnel Services or Executive Director of Educational Services as appropriate to position.

If a teacher or school employee is selected or requested to attend a conference for the purposes of receiving, giving, or part of an organizational recognition or award, consideration will be given.

If a conference is part of a school's membership/participation in an organization (i.e NEASC, RIIL), consideration will be given.

The district is not obligated to pay for registration, lodging, or travel to/from conference.

The Superintendent or designee has the final decision in approving attendance at conferences that occur during the school day.

If conference attendance is granted substitutes cannot be guaranteed even if paid for by the sponsoring organization. Availability of substitutes and impact on instruction will be given strong consideration for approval.

Other considerations including employee attendance and previously approved conference requests will be reviewed.

The attendee must present to other staff new research-based teaching strategies learned during the conference. A written summary and a report on follow-up plan (what will presentation to other staff members involve?)

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CONFERENCE REQUEST FORM

To be accompanied by a copy of the PD brochure for review.

Do not register until you have received approval and this form has been returned to you. A copy will be sent to your supervisor. If you have particular concerns, please call 270-8178.

- Conference attendees will share what they learned with their professional colleagues.
- Conferences of **3 DAYS or More** require Assistant Superintendent and School Committee approval. Make sure to submit completed forms 2 months in advance of conference date.
- If you plan on being away **2 DAYS or Less**, complete this form and submit 3 weeks in advance of conference date.

Elementary/M.S./High School Teachers	Principal or Program Director	Assist. Superintendent
Special Services/ Personnel	Principal/ or Executive Director	Assist. Superintendent
Program Supervisors	Principal/ or Executive Director	Assist. Superintendent
Principal, Administrator		Assist. Superintendent

Follow above chain of command

Name:

Signature:

School:

Department:

NAME OF CONFERENCE:

Location:

Date:

How would attending this conference address out District Strategic Plan and/or your School Improvement Plan?

SUBSTITUTE TEACHER NEEDED: Yes No

FUNDING SOURCE: Grant Funded PDI Funded **By** Person requesting the conference

ANTICIPATED EXPENSES: Transportation: \$ Mode of Travel:

Registration Fee: \$ Hotel: \$ Mileage Reimburse (.56 per mile): \$

Principal/Executive Director Signature:

Date:

Assistant Superintendent's Office Only: Approved By

Date: