



# RELEASE TIME REQUEST

Building: \_\_\_\_\_

Date: \_\_\_\_\_

A Release Time Request form must be filled out for every **conference, workshop, in-school meeting, field trip, athletic/coaching event or any school business related absence**. This form must be received by Business Office at least **three weeks** prior to the event. Each staff member is responsible for entering a School Business absence request on Will Sub. You may track approval of request on Will Sub.

Date(s) of requested release time: \_\_\_\_\_

Name of Staff Member(s):	AM	PM	Full Day	Is Sub Required?	Sub Needed For:
_____				Y N	
_____				Y N	
_____				Y N	
_____				Y N	
_____				Y N	

\*\*\*\*\* **NOTE: APPROVAL IS NEEDED BY BUDGET MANAGER PRIOR TO REGISTRATION**\*\*\*\*\*

Event Title: \_\_\_\_\_  
(Attach the Event Registration Form)

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

Event Dates: \_\_\_\_\_ Registration Deadline: \_\_\_\_\_

Please explain the purpose of the event and how it supports student achievement and school improvement goals: \_\_\_\_\_  
\_\_\_\_\_

Substitute Account Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Conference Account Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Estimated Costs		PO# (For Office Use Only)
Registration (receipt required)	\$	
Lodging (receipt required)	\$	
Parking	\$	
Meals (receipt required)	\$	
*Mileage ( _____ miles x _____ per mile = _____ )	\$	
Airfare	\$	
Luggage	\$	
Cabs	\$	
*Use Expense Reimbursement Form	<b>TOTAL</b> \$	

Applicant Signature:	Date:
Building Administrator/Director:	Date:
Budget Manager:	Date:
Dir. of Human Resources:	Date: