

THE CITY SCHOOL DISTRICT OF NEW YORK
DIVISION OF PERSONNEL
 65 Court Street, Brooklyn, New York 11201

RCS PA8C174

APPLICATION TO ATTEND SCHOOL MEETING OR CONVENTION OUTSIDE NEW YORK CITY

Read rules on reverse before completing application. Please print or type.

I. To be Completed by Applicant:

Full Name and Home Address of Applicant
 (or address to which reply is to be mailed)

School Number and Address (If Headquarters,
 include office or bureau and room number)*

ZIP

ZIP

*Note: If located other than at school or office shown, indicate payroll on which name appears:

File # _____ Social Security # _____

School District # _____

License _____ Special Assignment (if Any) _____

Note: Not used for per diem substitutes

| | | | | | |
|--|---|---------------------------|------|-------------------------------|---------|
| <input type="checkbox"/> Regularly Appointed | <input type="checkbox"/> Regular Substitute | Inclusive Dates of Excuse | | Inclusive Dates of Convention | |
| Days | Hours | Minutes | From | Through | From |
| | | | | | Through |

Permission to attend school meeting or convention outside New York City is applied for:

without pay with pay but without expenses with pay and payment of expenses**

**Note: When payment of expenses is requested, Item (a) must be completed and, if applicable, Item (b) must also be completed.

(a) Applicant is to attend meeting or convention as a designee of (as checked):

-Chancellor -Deputy Superintendent -Community Superintendent
 -Deputy Chancellor -Assistant Superintendent -Other:

and/or is to participate as: -speaker -panel member.

(b) If reimbursement of expenses is for Federally-funded project, data is furnished as shown

Function Number _____ Source of Funds _____

Name of School Meeting or Convention _____

Location of Event Outside New York City _____

-Applicant is a member of the organization sponsoring the meeting or convention. ***
 -Applicant is not

***Note: If not a member, name of any related organization in which membership is held _____

I hereby apply for permission to attend the above school meeting or convention outside New York City for the period and purpose stated and certify that the information shown above is complete and accurate. I understand that I may not claim non-attendance nor absent myself from work unless and until such permission has been granted by my Community Superintendent or the Assistant Superintendent in charge of the schools or other centralized activity in which I am employed. (Necessary additional comment may be added below.)

Date _____ Signature of Applicant _____

II. To be Completed by Principal or Other Appropriate Supervisor (If Other Give Title):

-Approved -Disapproved for reason(s) indicated:

Date _____ Signature of Principal _____
 (If Other, Give Title) _____

III. To be Completed by Community Superintendent or Assistant Superintendent in Charge of Schools or Other Centralized Activity in which Applicant is Employed:

-Approved. Authorization is hereby given the above-named employee to be absent from duty from _____ through _____ inclusive to attend the school meeting or convention indicated in Section I:

-without pay -with pay but without expenses with pay and payment of expenses.
 Overall maximum (if any): \$ _____

Upon presentation of this authorization by the employee to the principal or other appropriate supervisor, absence will be recorded as non-attendance in the pay status indicated and the authorization will be retained in school personnel files.

-Disapproved for the reason(s) indicated:

Authorized Signature _____
 Official Title _____
 Unit if Not District _____
 Date _____