

#152907304

City of Augusta  
Department of Public Education  
Professional Day Request Form  
(In and Out-of-state Request)

RECEIVED  
OCT 20 2014  
BY: SP

Name: Gretchen Livingston Today's Date: 10/14/14 School: Cory Location of conf/workshop: Baltimore, MD  
Name of Conference/Workshop: US Lacrosse National Convention Date(s) of Conference/Workshop: Jan 23<sup>rd</sup>-25<sup>th</sup>

- Please state the purpose of the conference/workshop: To remain up-to-date in coaching/teaching methods including concussions
- Please explain how the conference will benefit your students: It will directly benefit my lacrosse players as well as my students because I often attend sessions on leadership, etc.
- Please explain the arrangements you have made or will make to accommodate your students: sub for 1 day
- Please cite some examples of sessions you are planning to attend. (Attach information if you like) Concussion topics for sure - other session titles have not yet been released

Estimated costs:	Registration	\$		Substitutes needed? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no
	Accommodations	\$		
	Meals	\$		
	Travel	\$		
Budget account #:	TOTAL		\$	If yes, indicate # of days: <u>1</u>
	<u>I will cover this -</u>			

[Signature]  
Educator's Signature

[Signature]  
Assistant Superintendent's Approval

Special Education Director -or- Program Supervisor

[Signature]  
Building Administrator's Approval  
(required for all requests)

[Signature]  
Superintendent's Approval  
(required only if out-of-state)

Please send all requests to Donna Madore, Central Office

**PLEASE NOTE - THIS FORM REQUESTS USE OF A "PROFESSIONAL DAY"  
EMPLOYEE IS RESPONSIBLE FOR REGISTRATION**