



2022-23 PCSST PROFESSIONAL DEVELOPMENT REQUEST AND AUTHORIZATION FORM

PERSONAL DETAILS			
First Name	Last Name		
Title	Phone		
DATE			
Start Date	Return To Work Date		
Number of Days	Half Day Only	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon
PD REQUEST			
<p>STEP 1: Confirm that the date of the Board Meeting is prior to the submission of this PD request.</p> <p>STEP 2: Submit the completed and approved form to HR ten (10) active business days before the Board Meeting.</p> <p>STEP 3: Every PD request must be approved by the Board before the date of the PD.</p> <p>Please refer to the Board Meeting dates below and check the appropriate box:</p> <p> <input type="checkbox"/> July 20, 2022 <input type="checkbox"/> August 17, 2022 <input type="checkbox"/> September 21, 2022 <input type="checkbox"/> October 19, 2022 <input type="checkbox"/> November 16, 2022 <input type="checkbox"/> December 21, 2022 <input type="checkbox"/> January 18, 2023 <input type="checkbox"/> February 15, 2023 <input type="checkbox"/> March 15, 2023 <input type="checkbox"/> April 19, 2023 <input type="checkbox"/> May 10, 2023 <input type="checkbox"/> June 21, 2023 </p> <p><input type="checkbox"/> Please attach the registration form, institute brochure or other descriptive literature that includes all relevant information. INCOMPLETE REQUEST FORMS WILL NOT BE CONSIDERED.</p>			
<input type="checkbox"/> PD Title			
<input type="checkbox"/> Registration Deadline <i>Please follow-up with the Business Office (BO) for registration confirmation.</i>			
<input type="checkbox"/> Location (City, State)		<input type="checkbox"/> Hours	
<input type="checkbox"/> Registration Cost			
<input type="checkbox"/> Travel Expenses			
<input type="checkbox"/> Total Cost		Notes:	
Please see the Travel Reimbursement Forms to calculate the total cost.			
<input type="checkbox"/> Title I Eligible	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Title IIA Eligible	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> CDK Purchase Requisition Number for REGISTRATION (if applicable)			
<input type="checkbox"/> CDK Purchase Requisition Number for REIMBURSEMENT (if applicable)			
The PD Follow-up Form and Certificate of Completion must be provided to the BO in order for payment to be finalized.			

SEE REVERSE SIDE

SIGNATURES – PD REQUEST FORM

STEP 1 Employee Signature	STEP 2 Please obtain approval from your supervisor.	STEP 3 Please obtain approval from the School Coordinator or Principal.	STEP 4 Lead Person Signature (both campuses)	STEP 5 Await Confirmation Email from HR
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STEP 1

EMPLOYEE'S SIGNATURE

DATE

STEP 2

SUPERVISOR'S SIGNATURE

DATE

STEP 3

SCHOOL COORDINATORS OR PRINCIPALS SIGNATURE

DATE

SUBMIT TO LEAD PERSON

STEP 4

LEAD PERSON'S SIGNATURE

DATE

APPROVAL OF PD – OFFICE USE ONLY

HUMAN RESOURCES

Approved

Not Approved

Date: _____

Copy Submitted to BO

Signature of HR Coordinator: _____

BUSINESS OFFICE

Registration Confirmation Date: _____

PO Faxed Date: _____

Business Office will email staff member registration confirmation _____

PD follow-up form must be submitted to BO for
payment confirmation _____

Certificate of Completion Received

Copy Submitted to Director of Instruction

Copy submitted to Human Resources

SEE REVERSE SIDE