

**REQUEST FOR TRAVEL/ 5 OR MORE PARTICIPANTS
OR GREATER THAN \$5,000 APPROVAL**

Directions: Complete a form for each individual in the district requesting to attend the event. Incomplete forms and those without the required documentation and signatures will be returned unsigned district. All travel must have prior board approval. For information related to lodging and per diem rates, refer to <http://www.gsa.gov>, and for eligible subsistence/reimbursement, refer to N.J.S.A. 18A: 11-12; N.J.A.C. 6A:23A-5.8; 5.9 and New Jersey OMB **Circulars:** 06-14-0MB and 08-19-0MB.

District Name:
Township of Union Board of Education

Request Submission Date:
September 18, 2019

Name of Event:
NJSBA Workshop 2019

Event Location:
Atlantic City, New Jersey

District Contact Name:
Gregory E. Brenman, School Business Administrator/Board Secretary
Phone: 908-851-6411 Fax: 908-964-1462

JUSTIFICATION OF NEED

Attendance at various workshops at NJSBA Workshop Convention in Atlantic City, New Jersey.

Superintendent Signature: _____ **Date:** _____, 2019

District Board of Education approval date:
September 17, 2019

