

Note: Form has been simplified.

Requisitions are no longer linked to conference request entry.

Activity De	etail
Activity Name	*
Provider	* (other) V
Location Details	*
	Activity Name, Provider and Location Details are

Activity D	etail	
Activity Name Provider	* The Council's Women's Initiative	
Location Details	* The Otesaga Hotel & Resort	



Click in box, past dates entered will appear. Click on one or enter new one. Drop down calendar will appear.

Dates, Tim	es and Subs		🕂 Add Date 📏 🎝
Date	Time Begin ▲ * 12 am ✔ :00 ✔	1-1 of Time End 12 am ✔ :00 ヽ	f 1 First Previous Next Sub Act
Professional Deve	lopment Clock Hours	1-1 of	f 1 First Previous Next

	Date	s, Ti	mes	s ai	nd S	ubs							
										(† A	dd Date) % 🐬	×
	D-1-			-				Time Fud	1-1 of 1	First	Previous	Next	Last
	1/11/2	022			<u>те ве</u> 12 а	gin 🔺 m 🗙 😳 0 0 🗙		12 am ¥	•00 🗸			AC	X
		1		000	12 0			12 411	1-1 of 1	First	Previous	Next	Last
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	26	10 IU	vve	20	Pr 5a								
	20	3 4	5	6	7 8	Hours							
	9	10 11	12	13	14 15								
	16	17 18	19	20	21 22								
	23	24 25	26	27	28 29								
	30	31 1	2	3	4 5								
	To	dave Dece	amhar	14 3	0021	for the conferen	ce below.						
	NOTE: F	urcnase	orae	rs a	re requ	red for the regist	ration, hote	el, meals, mi	leage an	d any o	ther need	ed	
t	transpo	ortation	once	the (confere	nce request is app	proved.						
7	Q	Ħ	(2		j 🐖 🧕	x	- -	9	×	T		
/													
ick on da	te for	first da	ay.										
							<u> </u>						
			No	nto.	Entor	first day and la	st day of c	onference	Entor	octima	tod star	t and or	nd ti
			110	ne.	Linter		st day of t	Conterence	. Linter	estille		t anu er	iu iii
			lf t	trac	king Pl	D hours, enter t	otal estim	ated PD ho	ours.				
		,											

1	PD hours, enter	total	conference session hours.
	Enter <u>estimat</u> ¹² may use the r 1	am ^	and calculate. Budget code is not required. You your Program instead.
hard	Attach the col webpage, age 2 hottom of the	am	details (pamphlet, information from conference istration information,etc.) under Pre-Activity at the
	Click Submit.	am	
	All requests are ap Program Director a Superintendent.	am	electronically by the Program Leader and or the Deputy Superintendent or District
	** Once the confer created by the Bus expenses and to al 7	am am	uest is approved, a Conference PO Template will be ice for the conference attendee to enter anticipated r any expense reimbursements. The conference
	attendee will be th accordingly. Instru	am	tioner on the PND and will need to update it re in the PO NOTES.
2	94	am	
	11	am	
	Activity Detail	2 pm	
	Activity Name * The C	pm	omen's Initiative
	Provider (other 2	pm	pss
	Coope 3	pm	itel & Resort Y
	4	pm	
	Dates, Times an ⁵	pm	
		pm	Add Date Next Las
	Date Tin 1/11/2022 8	am 🗸	Time End Sub Action :00 ✓ 12 am ✓ :00 ✓ X
	[updat_times] Professional Development Clc (Exclude lunch and other breaks when entering the total PD Clock Ho	ock Hou	1-1 of 1 First Previous Next Las
	/		
		.	

Click on start time for first day.

PD hours, enter total conference sessio	on hours
 Enter <u>estimated</u> costs and calculate. Be may use the name of your Program inst 	u ¹² am ¹ le is not required. You
 Attach the conference details (pamphle webpage, agenda, registration informa bettern of the form 	et ation from conference at 2 am under Pre-Activity at the
 Click Submit. 	3 am
All requests are approved electronically by the Program Director and then the Deputy Super	tl ^{4 am} am Leader and or ri _{5 am} t or District
** Once the conference request is approved,	, 6 am ence PO Template will be
created by the Business Office for the confer expenses and to also use for any expense re attendee will be the requisitioner on the PNI	<i>ii</i> ⁷ am <i>ients. The conference need to update it</i>
accordingly. Instructions are in the PO NOT	E 8 am
	9 am
	11 am
Activity Detail	12 pm
Activity Name * The Council's Women's Initiative	1 pm
Provider * (other) V NYCOSS	2 pm
Location Details * The Otesaga Hotel & Resort Cooperstown, NY	3 pm
	4 pm
Dates, Times and Subs	5 pm
	6 pm 🕂 Add Date 📏 😼 📧
Date Time Begin A	7 pm 1-1 of 1 First Previous Next Last Sub Action
1/11/2022 8 am ♥ :0/♥	12 am V (:00 V
[update times] Professional Development Clock Hours [Exclude lunch and other breaks when entering the total PD Clock Jours.)	1-1 of 1 First Previous Next Last

Click on end time for first day. Example is below.

Click on Add Date for the last day of the conference. Follow the above instructions for entering date and times. Ignore the Sub boxes.

			+ Add Date
Data	Time Begin 🔺	1-2 of Time End	2 First Previous Next
1/11/2022	12 am ♥ :00 ♥ 8 am ♥ :00 ♥	12 am 🗸 :00 🗸 4 pm 💙 :00 🗸	
		1-2 of	2 First Previous Next

Exa	mple of complete	ed dates and times.			
	Dates, Time	s and Subs			
				🕂 Add Date 💊	5 🗷
			1-2 of 2	First Previous Next	t Last
	Date	Time Begin 🔺	Time End	Sub A	Action
18	1/12/2022	8 am 🖌 🛛 :00 🗸	4 pm 🖌 :00 🗸		- ×
1	1/11/2022	8 am 💉 🗆 :00 🗸	4 pm ❤ :00 ❤		\sim
			1-2 of 2	First Previous Next	t Last
	[update times] Professional Develo (Exclude lunch and othe when entering the total	pment Clock Hours r breaks PD Clock Hours.)			

			🕂 Add Date
Date	Time Begin 🔺	1-2 of Time End	2 First Previous Next Sub
1/12/2022	8 am 🖌 :00 🗸	4 pm 🖌 :00 🗸	
1/11/2022	8 am 🖌 :00 🗸	4 pm 🖌 :00 🗸	
		1-2 of	2 First Previous Next
[update times]			
Professional De (Exclude Junch and	other breaks		
when entering the	total PD Clock Hours.)		

Please enter the estimated costs for th		
	he conference below.	
<u>Note:</u> Purchase orders are required fo transportation once the conference re	r the registration, hotel, mea quest is approved.	ls, mileage and any other needed
Estimated Costs		
Registration Fee	150	
Hotel Room	0.00	
Meals	0.00	
Mileage Reimbursement (Private Auto) 0.00	
Air/Train/Rental Car	0.00	
Tolls	0.00	
Other	0.00	
Total Costs	\$150.00	(calculate total)
Budgeting Fund Budget Code		Amount
Business C	Office OR 001-1310-454	
	1	
Cost Notes		
	\frown	
	<u> </u>	
Note: Enter estimated costs. (Click on Calculate Tota	l.
Add Program Name or budget (code under Budget Co	de.
Add estimated total under Amo	bunt	



Attached File	
File Choose File Binder1_Page_2.jpg	
File Uploaded Successfully	
Note: maximum file size is 4 MB (4,194,304 Bytes) File Name Binder1 Page 2 ing	
Description	
OK Cancel	
Attached Files	
File Name ▲ File Content Type File Uploaded 1-1 of 1 First Previous Next Last Binder1 Page 2.jpg Image (JPG) 12/14/2021 06:22 AM 299.3 KB Image	
1-1 of 1 First Previous Next Last	
Submit Save for Later Cancel	
	_
Submit OB Save for Later	
Note: Only submitted conference requests will move through the	approval process.
Once a conference request is approved, the Purchasing Assistant v	vill forward the Conference Expense