



Approval Request Form for Coaching Professional Development (Stipend)

Section 12 – Training

C. The District will annually provide up to \$200 per sport specific professional development for contracted coaches. All professional development must be pre-approved by the Athletic Director to qualify for reimbursement.

Name: _____ Junior High High School

Type of Coach:

- Baseball Basketball Bowling Cheer Cross Country Dance Football Golf Soccer Softball Swimming/Dive Tennis Track Volleyball Wrestling

Date of Professional Development: _____ Location: _____

Name of Clinic/Class: _____

Brief Description and Breakdown of Expenses: (ie, Hotel, Cost of Clinic/Class, Mileage, Meal etc. Attached supporting documents if needed.)

Employee Signature: _____ Date: _____

Athletic Director Approved Denied

Signature: _____ Date: _____

****This approval form must be attached to reimbursement request and submitted to AP****