

**Etiwanda Teacher Association  
Conference Request**

**Please send your completed form through district mail to Michelle Carney at Etiwanda Colony. The executive board will contact you with an approval or denial  
Please wait for authorization before proceeding forward with registration.**

Name: \_\_\_\_\_

Site Location: \_\_\_\_\_

Cell phone: (    ) \_\_\_\_\_

E-mail: \_\_\_\_\_

**Purpose of Request**

Conference name: \_\_\_\_\_

Dates: \_\_\_\_\_

**Reason for Request:**

Please use the space below to provide us with information that will help us in evaluating your request.

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**Please be advised that if you are approved to attend the conference you will be asked to come make a presentation at the site rep meeting following the conference.**

Thank you for your interest!

ETA