

GARDEN GROVE UNIFIED SCHOOL DISTRICT
Office of Personnel Services

WORKSHOP ATTENDANCE VERIFICATION AND PRE-APPROVAL FORM

Employee Name (Please Print):	Employee's S. S. # or Employee #:
Name of Class/Workshop:	Date(s) of Class/Workshop:
Location of Class/Workshop:	Time of Class/Workshop (Example: 6 p.m. - 9 p.m.):
Employee Signature:	Employee's Worksite:
Principal or Department Head Pre-Approval:	Workshop Presenter's signature (for workshops only):

Forms\Stipend Pre-Approval Form (Rev. 1/03)

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