# Ho-Chunk Nation
# Department of Education-SCR Division
## Training/Conference Justification

☐ **APPROVED** ☐ **DENIED**

**Name:** _____

**Training/Conference:** _____

**Date(s) of Training/Conference:** _____

**Goals/Objectives for Training/Conference?**

_____

_____

**How will you use the information/knowledge/skills acquired through this training or conference?**

_____

_____

_____

_____

**How does attending this training/conference apply to your job or role as a parent or IEC member?**

_____

_____

_____

**Would you be open to sharing what you learn at this conference with other employees or parents**? ☐ YES ☐ NO

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