



# STAFF OUT-OF-STATE TRAVEL REQUEST

In accordance with Board Policy 5403, any District employee or School Board member wishing to travel out-of-state for school/district business must complete this request and receive approval prior to making any financial commitment. All out-of-state school/district travel for staff, regardless of funding source (even if personal funds), must be approved by administration and the Board.

Please complete this form and submit it to your supervisor no less than 15 days prior to the regularly scheduled Board meeting. Agenda items must be submitted in BoardDocs at least 10 days prior to the Board meeting. The employee requesting the travel, or an administrator with knowledge of the activity, must be in attendance at the Board meeting to respond to questions, if any.

School or Department:  No. of Travelers:

Please list all travelers for your school/building (if more than six, list additional names in the comment section on page 2) :

Name <input type="text"/>	Name <input type="text"/>
Name <input type="text"/>	Name <input type="text"/>
Name <input type="text"/>	Name <input type="text"/>

Name of Conference/Event:

Venue:  City:  State:

Event Dates: Start:  End:   Attending Pre-Conference Session(s)

Travel Dates: Depart:  Return:

Purpose of Travel:  Attend Conference/Event  Presenter  Observe a Program/Activity  Receive Certification

Other (explain):

Please explain how your attendance at this event will enhance student learning and achievement and/or help you to do your job more effectively:

How will you utilize what you learn and/or share your learning with colleagues?

What school/department or district events will you miss in your absence (i.e. assessments, Building Days, District Day, etc.)?

**Staff Out-of-State Travel Request (cont.)**

**EXPENSES:**

Registration cost per person:	<input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Travelers	=	Total Registration	<input type="text"/>			
Airfare cost per person:	<input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Travelers	=	Total Airfare	<input type="text"/>			
Baggage fee (per bag):	<input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Bags Checked	=	Total Baggage	<input type="text"/>			
Hotel cost per night:	<input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Nights	<input checked="" type="checkbox"/>	<input type="text"/>	Rooms	=	Total Hotel	<input type="text"/>
Ground Transportation (check all that are included):	<input type="checkbox"/> Rental Vehicle	<input type="checkbox"/> Taxi, Uber, Lyft, Car Service, etc.			=	Total Gr. Trans.	<input type="text"/>			
	<input type="checkbox"/> Shuttle	<input type="checkbox"/> Bus, Train, Tram, Subway								
Anticipated Personal Vehicle Miles	<input type="text"/>	<input checked="" type="checkbox"/>	<b>per mile</b>	<input type="text"/>	Vehicles	=	Total Mileage	<input type="text"/>		
	<small>(Current IRS mileage rate, subject to change Jan. &amp; July)</small>									
Anticipated District Vehicle Miles	<input type="text"/>	<input type="checkbox"/> Suburban	<input type="checkbox"/> Van	<input type="checkbox"/> Car	=	Total Dist. Vehicle	<input type="text"/>			

**Meals:** You can estimate actual meal costs (including customary gratuity) or use per diem rates as follows. Generally, only meals not provided at the conference/event are eligible. If claiming actual costs, itemized receipts will be required. Receipts MAY NOT INCLUDE any unallowable items. No receipts are required if claiming per diem rates.

No. of breakfasts per person	<input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Travelers	=	Total Breakfasts	<input type="text"/>	<input type="checkbox"/> Using Actual
No. of lunches per person	<input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Travelers	=	Total Lunches	<input type="text"/>	<input type="checkbox"/> Using Actual
No. of dinners per person	<input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Travelers	=	Total Dinners	<input type="text"/>	<input type="checkbox"/> Using Actual
							Total Meals	<input type="text"/>
Other 1 (Describe):	<input type="text"/>					Total Other 1	<input type="text"/>	
Other 2 (Describe):	<input type="text"/>					Total Other 2	<input type="text"/>	
Other 3 (Describe):	<input type="text"/>					Total Other 3	<input type="text"/>	

<b>Total estimated cost for this travel (regardless of source)</b>	<input type="text"/>
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**FUNDING SOURCES:**

Building/Department (General) Funds:	<input type="text"/>	Grant Funding:	<input type="text"/>
Professional Development Funds:	<input type="text"/>	Donations:	<input type="text"/>
Personal Funds:	<input type="text"/>	<input type="checkbox"/> Title <input type="checkbox"/> LAP <input type="checkbox"/> CTE	<input type="text"/>
Costs Waived (for ex. if presenting):	<input type="text"/>	Other	<input type="text"/>

<b>Total of all funding - This total must match the total estimated cost above</b>	<input type="text"/>
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Comments:

**Staff Out-of-State Travel Request (cont.)**

**The following are required:**

- I have attached general information about the event (name of event, organization/provider, dates, location, etc.)
- I have attached the agenda, itinerary or schedule of events.
- I have made arrangements with my immediate supervisor for coverage of my job responsibilities while I am not at work.

Comments:

\_\_\_\_\_  
Signature of the traveler completing this request

Date

\_\_\_\_\_  
Signature of immediate supervisor

Date

\_\_\_\_\_  
Signature of principal or director (if different than supervisor)

Date

**THIS REQUEST MUST BE SUBMITTED IN BOARDDOCS NO LATER THAN 10 DAYS BEFORE THE REGULAR BOARD MEETING.**  
If any portion of this travel is being paid by funds from the Teaching and Learning Department, be sure in BoardDocs to select the approval tree that includes the director who has oversight of that budget (for example: If CTE funds are included, please select the approval tree with "staff CTE travel" in the name.)