

## TRAVEL REQUEST

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

DESTINATION: \_\_\_\_\_

DATE LEAVING/RETURNING: \_\_\_\_\_ / \_\_\_\_\_

REASON: \_\_\_\_\_

TIME LEAVING/RETURNING: \_\_\_\_\_ / \_\_\_\_\_

**EXPENSES:**

**MEALS:**

- ADULTS ONLY:

_____	Breakfast(s) not to exceed	\$10.00	\$ _____
_____	Lunch(es) not to exceed	\$12.00	\$ _____
_____	Dinner(s) not to exceed	\$14.00	\$ _____

- STUDENTS ONLY:

_____	Breakfast(s) not to exceed	\$ 7.00	\$ _____
_____	Lunch(es) not to exceed	\$ 8.00	\$ _____
_____	Dinner(s) not to exceed	\$ 9.00	\$ _____

SUBTOTAL MEALS \$ \_\_\_\_\_

**TRANSPORTATION:**

_____	Miles @ \$.51/Mile – PROVIDE MAPQUEST SUPPORT	\$ _____	
	Parking	\$ _____	
	Other (explain) _____	\$ _____	

SUBTOTAL TRANSPORTATION \$ \_\_\_\_\_

**OTHER EXPENSES:**

Registration Charges		\$ _____	
Field Trip Fees		\$ _____	
Membership Dues		\$ _____	
Other _____		\$ _____	

SUBTOTAL OTHER EXPENSES \$ \_\_\_\_\_

**LODGING: Make Check Payable to:** \_\_\_\_\_

_____	room(s) @ \$ _____ per night X _____ night(s)		\$ _____
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**TOTAL EXPENSES:** \$ \_\_\_\_\_

BUDGET ACCOUNT NUMBER(S): \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**NOTE: IF APPLICABLE, ALL MEAL RECEIPTS, LODGING RECEIPTS AND/OR EXCESS MONEY MUST BE RETURNED TO THE BUSINESS OFFICE IMMEDIATELY FOLLOWING YOUR RETURN.**

**TOTAL AMOUNT ADVANCED BY DISTRICT** \$ \_\_\_\_\_

**TOTAL ACTUAL EXPENSES** \$ \_\_\_\_\_

**BALANCE DUE FACULTY MEMBER OR DISTRICT** \$ \_\_\_\_\_

\_\_\_\_\_  
FACULTY/STAFF SIGNATURE

\_\_\_\_\_  
PRINCIPAL/SUPERVISOR SIGNATURE

\_\_\_\_\_  
SUPERINTENDENT SIGNATURE

\_\_\_\_\_  
ASSISTANT SUPERINTENDENT OF FINANCE SIGNATURE

**AFTER REQUISITION ENTRY, FORWARD ORIGINAL TRAVEL REQUEST FORM WITH SIGNATURES TO THE BUSINESS OFFICE.**