One request per employee for Out-of-District \& Out-of-State Travel

Name: $\qquad$ Travel Dates: $\qquad$

Name of Seminar/Workshop/Other: $\qquad$

Destination:

Relevance to Job Assignment: $\qquad$

Registration Fee: 0
Travel Schedule

| Date/Time | Depart from <br> Location | Arrive at <br> Location | Fare or <br> Mileage* | Breakfast <br> $\$ 7.00^{* *}$ | Lunch <br> $\$ 15.00^{* *}$ | Dinner <br> $\$ 30.00^{* *}$ | Lodging <br> Rate |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
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|  |  |  |  |  |  |  |  |
| TOTAL |  |  |  |  |  |  |  |

*IRS mileage rate $1 / 1 / 22=.585$ mile **Maximum meal cost reimbursed with receipts (including 20\% gratuity). Itemized receipts required for reimbursement.

Parking Fees (with receipt): $\qquad$ Other Costs: $\qquad$
Total Cost: $\qquad$ Budget Codes: $\qquad$
Please Note: This form is to be approved by the Superintendent before any employee travels out-of-district or out-ofstate for purposes of seminars, workshops, etc. Out-of-State travel also requires pre-approval by the ESD Board.


Superintendent $\qquad$ Date $\qquad$
Board Approval:
YES Date: $\qquad$

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[^0]:    *Each employee requesting out of district/out of state travel reimbursement must attach this form to their travel reimbursement form.

