

# Marion School District

## Travel Request Form

The purpose of this form is to request approval from the principal/supervisor for necessary travel: PD, conferences, meetings. Once the principal/supervisor has approved the request, it will be forwarded to the appropriate administrator for funding approval.

Teacher/Staff member: \_\_\_\_\_

Activity/Event: \_\_\_\_\_

Date Leaving: \_\_\_\_\_ Date Returning: \_\_\_\_\_

Place/City: \_\_\_\_\_

The purpose of my attendance at this activity/event is: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### The estimated costs are:

Travel : \_\_\_\_\_ School Vehicle requested:  Place check mark if using school vehicle

**School vehicle has to be requested from Kenny Phillips. If not available, then attached email from Kenny Phillips stating no vehicle available.**

(.52¢ per mile or current state rate per mile): if not using school vehicle \$ \_\_\_\_\_

Meals: (Per GSA rate) \$ \_\_\_\_\_

Lodging: \$ \_\_\_\_\_

Registration Fees: \$ \_\_\_\_\_

Other: \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL COST OF TRAVEL \$ \_\_\_\_\_**

*Lodging and food costs are reimbursable only on overnight stays. Upon completion of travel, a signed Travel Reimbursement form should be completed and forwarded to your campus/department bookkeeper for payment, along with itemized receipts.*

Signature of Principal / Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Budget Number: \_\_\_\_\_

Signature of Budget Admin: \_\_\_\_\_ Date: \_\_\_\_\_