

# Marion School District Travel Request

The purpose of this form is to request approval from the principal/supervisor for necessary travel: professional development, conferences, meetings. Once the principal/supervisor has approved the request, it will be forwarded to the appropriate administrator for funding approval. When the administrator has approved the request, a copy will be returned to the principal/supervisor, who will notify the individual of approval. The original will be forwarded to or kept at Central Office for filing.

Teacher/Staff Member making request: \_\_\_\_\_

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

From Date: \_\_\_\_\_ Time: \_\_\_\_\_

To Date: \_\_\_\_\_ Time: \_\_\_\_\_

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

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

\_\_\_\_\_

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

Teacher/Staff Member

**The estimated costs are:**

Travel (current state rate per mile): \$ \_\_\_\_\_

Meals: \$ \_\_\_\_\_

Lodging: Hotel \_\_\_\_\_ Confirm # \_\_\_\_\_ \$ \_\_\_\_\_

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

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

Total \$ \_\_\_\_\_

**\*Lodging and food costs are reimbursable only on overnight stays and only with itemized receipts. The principal/supervisor is responsible for completing the necessary steps to secure purchase order(s) for costs that are anticipated for the trip. Upon completion of travel, a signed "Statement of Travel Expenses" should be completed and forwarded to the central office for payment. A copy of the purchase order authorizing this expense should be attached.**

I recommend this request be: Denied \_\_\_\_ (Return to Staff Member.)  
Approved \_\_\_\_ Fund Responsible \_\_\_\_\_

Principal/Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved \_\_\_\_ Date Approved \_\_\_\_\_

Denied \_\_\_\_

Administrator Signature: \_\_\_\_\_