

Meeting Attendance Requests

1. The Meeting Attendance Request should be filled out by the person requesting the approval. This form is on the district website under "Staff" and "SDR forms".

1A. Top Section

- A. Name of Person(s) Attending - This should be completed for multiple people only when one person is submitting the request for reimbursement. Otherwise each person should submit a form.
- B. Date Submitted - The date request is being turned in for approval.
- C. Title of Meeting - As listed on registration forms.
- D. Location of Meeting- City and State
- E. Attendance Dates - Dates meeting is taking place.
- F. Time Away From Job - Example ½ Day or 1 Day
- G. Justification for Release - Attach a copy of the program and write a brief description as to how this will be beneficial for your position and/or students.

1B. Middle Section-Left Hand Side-"This section to be completed by Requestor."

- A. Transportation - The amount requested for mileage, airfare, fuel, etc.
(If using a district suburban only write in the fuel cost amount-suburban)
- B. Lodging - The amount requested for hotel, motel, etc.
- C. Meals - The amount requested for meals you are paying for.
- D. Substitute - The amount payable to a substitute as your replacement.
- E. Registration - The amount payable for the registration fees.
- F. Other - Any other anticipated expenses you may incur while on the trip (ex. Parking).
- G. Immediate-Supervisor/Date - Approval Signature and Date (if required).

1C. Middle Section-Right Hand Side-"This Section to be completed by Supervisor"

- A. This section will be completed only if the person approving the request feels the amounts should be revised. If any change is located in this section, this new amount will supercede the amount by requestor.
- B. Principal/Date - Person whose accounts will be paying for the meeting costs.

1D. Do not complete the "Actual Expenses" area at this time. This area will be completed after attending the meeting. See Below under "Actual Expenses".

1E. Bottom Section - Last line on the page bottom left hand corner.

- A. Account Number - The account number must be on the request when the form is initially turned in.
**For requests concerning Grants, please contact the appropriate Department Head or Central Office to determine who should be completing the account number section and who should be signing the Principal/Date section.

Each person attending the meeting should complete a separate form if they are going to be reimbursed for meals and transportation separately. If you are riding together, the person driving should fill in the Transportation area and the people riding should leave this area blank on their request with a brief comment listing who they are riding with.

If the request is for funds payable through grant programs, the form will require the Immediate Supervisor (Principal) signature prior to submitting the form to the person in charge of the grant program. Once the

principal signs the form they should forward the form to the person in charge of the grant program. Example: if the monies will be coming out of the Idea grant funds, the form should be sent to Maggie Peterson for her signature. If the monies will be coming out of Curriculum funds, the form should be sent to Teri Maney for her signature. There may be other times when a Central Office signature is required such as the Activities department, if so, please send to the Central Office Personnel responsible for the approval. Upon final approval the form will be returned to the requestor.

Once the person receives the approved form, the proper purchase order requisitions should be completed and submitted to your secretary for entry into the Skyward program. A purchase order requisition should be completed for all items that need to be prepaid or any items that the school district will receive an invoice for. Please see the Purchase Order instructions for the proper way to complete a purchase order requisition.

Upon completion of your meeting you will need to complete the “Actual Expenses” area.

Actual Expenses

1. The person requesting reimbursement should complete the actual expense area.

1A. Travel - This area should detail the round trip miles multiplied by the current mileage rate of 56 cents. If you prefer to turn in your gas receipts, reimbursement will be made from the detailed receipts. You will need to total your gas receipts and place the amount to the right hand side in the “Total Travel” column. If you used a district suburban and charged fuel on our account you will just need to turn in the receipt with the form and not write a cost in the “actual expense area”.

1B. Lodging - Any expenses you incurred for motel or hotel would be included here. If you don't follow the district's purchase order requisition policy, the district will not reimburse the tax.

1C. Meals/Tips - This area should be detailed by day. Reimbursement for meals will only be done if the trip requires an overnight stay. Our meal reimbursement is \$8.00/breakfast, \$12.00/lunch and \$20.00/supper. Please note if the meeting you are attending supplies any of the meals at an additional cost, you will need to use the individual reimbursement amounts when calculating your expenses. Example, if they supply lunch, you would receive \$12.00 toward the cost of the meal. Each meal should be listed on the form by date, total amount of the meal and tips. You should then total the amount of the meal and the tips, not to exceed the maximum amount reimbursable. You would total all your meal expenses and place that amount in the “Total Meals/Tips” area. Please note detailed receipts are required for reimbursement and we will only reimburse tips at a total of 15 percent of the meal cost, not to exceed the maximum reimbursement.

1D. Miscellaneous - This area would be used for telephone calls, cab fare, registration (if paid by you) or shuttle services. Basically any reimbursable item not detailed above. You would total all of your miscellaneous receipts and place that amount in the “Total Miscellaneous” area.

1E. Total Claim - This would be the total of the above “Total” lines. This is the amount you are requesting to be reimbursed.

1F. Employee Signature/Date - You would sign and date in this area.

1G. Immediate Supervisor/Principal/Date – If the request is more than the original/revised request, you will need to submit the form back to the final approver for additional approval. If the request is at or below the original request, please send your completed form to the district bookkeeper for payment.

*******Please note actual/detailed receipts must accompany all reimbursement requests.**