



RANKIN COUNTY SCHOOL DISTRICT REQUEST FOR TRAVEL ADVANCE

Employee Name: _____

Vendor Number: _____

Fund:	_____
Gen. Ledger:	_____
Function:	_____
Program:	_____
Object:	_____
School / Dept:	_____
Modifier:	_____

Date(s) of Meeting / Trip: _____ Destination(s): _____

Title of Meeting: _____

Purpose / Benefits of Meeting / Trip: _____

Total Estimated Cost (from Worksheet on Back): _____

Travel Advance Amount Requested: _____

Employee Signature: _____ Date: _____

Approved by: _____ Date: _____

Approved for Payment by: _____ Date: _____

INSTRUCTIONS FOR TRAVEL AUTHORIZATION

1. Complete all applicable items and obtain approval PRIOR to commencing travel.
2. A separate form must be completed for each traveler.
3. Be specific as to purpose/benefits of trip or meeting.
4. Be as accurate as possible in estimating cost, including airfare, lodging, meals, gratuities, taxes, rental cars, or any other applicable travel requirements.
5. Use RCSD Purchasing Policy #P-15 to obtain maximum meal reimbursements.
6. The travel advance requested, if any, should include a total of only those items not prepaid (airline ticket, registration, etc.) and must be reconciled on the Voucher for Reimbursement of Expenses Incident to Official Travel form within fifteen (15) days of return.
7. You may only have one travel advance outstanding at a time.
8. Travel advances are available only for TRAVEL OUTSIDE THE STATE.
9. An approved copy of this form with supporting documentation (receipts, copy of tickets, etc.) must be submitted with the the Voucher for Reimbursement of Expenses Incident to Official Travel form in order to receive reimbursement.

Worksheet

Estimated Costs

Air: _____

Meals: (_____ Days @ \$ _____ /Day) _____

Lodging: (_____ Days @ \$ _____ /Day) _____

Registration Fee: _____

Conference Fee: _____

Rental Car: (_____ Days @ \$ _____ /Day) _____

Other: _____

Total Estimated Cost: _____