

## CONFERENCE / TRAVEL AUTHORIZATION AND REIMBURSEMENT

*Prior to departure, all employee travel must be approved using this form. Only 1 employee per form.*

Employee: \_\_\_\_\_ School: \_\_\_\_\_ Date: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
                     Street  City  State  Zip  
 Home phone or cell phone \_\_\_\_\_  
 Conference: \_\_\_\_\_ Date of Conference: \_\_\_\_\_  
 Location: \_\_\_\_\_

Date & Estimated Time of Departure: \_\_\_\_\_  
 Date & Estimated Time of Return: \_\_\_\_\_

<b>Central Office Use Only</b>	
<input type="checkbox"/> High Rate Area*	<input type="checkbox"/> Regular Rate Area <small>(Includes all the state of KY)</small>

### SECTION A – ESTIMATED EXPENSES

ITEM	AMOUNT <i>(Estimate)</i>	PO. NUMBER <i>(CO Use Only)</i>	Payment Fund Code or Grant Name	Documentation to Attach
Registration				Agenda, Cert. of Attendance
Airfare				Confirmation, Tickets
Lodging				Confirmation, Receipts
Meals				Receipts (Itemized)
Mileage				Use Mileage Chart
Substitute				
Other				
<b>TOTAL</b>				

<b>SECTION B - SUPERVISOR APPROVAL</b> *Must be approved prior to travel to qualify for reimbursement  <div style="display: flex; justify-content: space-around;"> <span>Initial</span> <span>Date</span> </div> Principal / Supervisor _____  Superintendent _____	
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Date(s) Sub Needed: List Below	School	All Day	Half Day
<b>Local Mileage</b> <small>(other Locations see chart on website)</small>			
<b>CITY</b>	<b>MAX MILEAGE</b>	<b>CITY</b>	<b>MAX MILEAGE</b>
Bardstown	90	Glasgow	115
Bowling Green	180	Hodgenville	70
Danville	100	Lexington	180
Elizabethtown	94	Louisville	180
Frankfort	165	Somerset	135

### SECTION C – REIMBURSEMENT *(Do not complete until after travel is concluded)*

Date	No. of Miles	Mileage X .45	Lodging Receipts required	Breakfast * 6:30 am – 9:00 am Reg. \$9 – High \$10	Lunch * 11:00am - 2:00pm Reg. \$11 – High \$13	Dinner * 5:00 pm – 9:00 pm Reg. \$20 – High \$23	Misc. Receipts Required (tips, parking)	TOTAL

\* Meals with receipts attached will be reimbursed at a rate not to exceed \$40.00 per day for travel unless the meal is part of the conference registration.  
 \* Only meal costs that involve overnight stay will be reimbursed.

**TOTAL DUE:**

\* Employee signature below verifies these meals were necessary as a result of the authorized travel and were NOT provided in any conference registration fees that may have been paid.      **\*\*Do not sign until travel is completed.\*\***

Employee Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

**APPROVAL FOR PAYMENT:**

Principal/Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Central Office Signature \_\_\_\_\_ Date \_\_\_\_\_

**CAMPBELLSVILLE INDEPENDENT PUBLIC SCHOOLS  
TRAVEL AUTHORIZATION/REIMBURSEMENT INSTRUCTIONS**

**EMPLOYEE (Use one form per employee):**

1. Travel is not approved until employee receives confirmation of approved travel from Principal/Supervisor and Superintendent. **Expenses incurred for travel without prior approval are the responsibility of the employee and not the school or district.**
2. In **Section A**, estimate the total cost of the trip and submit to your Principal/Supervisor for approval at least ten (10) days prior to your trip. ALL travel requests must have prior approval of the Principal and Superintendent. Family members may accompany employee at employee's expense.
3. **LODGING:** Only room costs and parking are reimbursable lodging expenses. Charges for movies, telephone calls, and other personal expenses are not approved for reimbursement. Meetings within a 50 mile distance are not approved for overnight lodging expenses or meals. Reservations must be made by the employee attending the conference.
4. **TRANSPORTATION:** Car rental is not a reimbursable expense without prior approval. Airline reservations should be made by Central Office. Unused airline tickets become the property of the Board and must be returned to Central Office.
5. **MEALS & TIPS:** Reimbursement of meals & tips is based on a per diem rate established by the Board and may not exceed \$30 per day for meals. A listing of the High Rate Areas recognized by the secretary of the Finance and Administration Cabinet for the state of Kentucky may be found on the district web page (<http://cville.kyschools.us/District Office/Forms/forms.htm>). Meals provided as part of conference registration fees and local meals are not reimbursable expenses. **Meals purchased while attending one-day meetings are not reimbursable expenses.**
6. **OTHER:** List items such as purchases at conferences, tolls, cab fare, airport shuttle fare, parking fees, etc. in this column. **ITEMS PURCHASED AT A CONFERENCE WILL BE REIMBURSED IF APPROVAL IS RECEIVED PRIOR TO TRIP—SALES TAX IS NOT REIMBURSED!**
7. Central Office will assign PO numbers when form is received—leave this section blank.
8. After you have completed **Section A**, forward the form to your Principal/Supervisor for approval.
9. After Principal and Superintendent have approved your travel, the original will be returned to you as approval of your travel. Always be sure your travel form has been returned to you prior to the departure date; there may be special circumstances you need to be aware of before leaving. **Travel is not approved until you have received your form back from central office.**
10. Within one week of completing your travel, list your expenses by day in **Section C** of the form. Total the expenses for each day and compute the grand total to be reimbursed. **Detailed / itemized receipts must** accompany all requests for reimbursement. **A copy of the conference agenda, certificate of attendance, etc must be attached to this form as proof of attendance.**
11. Reimbursement for actual mileage traveled shall not exceed the maximum mileage chart. If additional mileage expense is requested you must provide a written explanation as to the reason for the additional travel.
12. Sign and date the form and make a copy for your records. **All reimbursement requests must be made within thirty (30) days in accordance with board policy 03.125.**
13. Attach itemized receipts and forward to Principal for approval. **KEEP A COPY OF RECEIPTS FOR YOUR RECORDS IN CASE ACTUAL RECEIPTS BECOME SEPARATED FROM EXPENSE REPORT!!**
14. Principal will review and approve expenses and forward to Central Office for approval and payment. Out-of-district travel will be reimbursed within fifteen (15) working days of receipt at Central Office.

**PRINCIPAL/SUPERVISOR:**

1. When travel request is received from employee with Section A properly completed, Principal/Supervisor and Superintendent will sign in **Section B** of the form to indicate approval of estimated travel expenses.
2. Check the funding source for the travel. If a code is not listed, write in the proper code or funding source.
3. Initial and date approval on appropriate line and forward all copies to Central Office.
4. After employee completes travel, employee will complete **Section C**, attach detailed receipts and forward to Principal/Supervisor for approval.
5. Make any necessary changes/corrections to the form.
6. Sign and date approval of actual expenses on appropriate line and forward to Central Office. Make a copy for school record of employee travel.

**CENTRAL OFFICE:**

1. Upon receipt of properly completed **Section A and B** from the principal, indicate approval of travel by initial and date on appropriate lines. If Director approval is required, forward to Director for approval before signing.
2. Keep a copy for Central Office records and return other copies to employee to indicate approval of travel.
3. After travel is completed and copy is received from Principal/Supervisor, review actual expenses and make necessary changes/corrections.
4. Sign and date approval on appropriate line and forward form and receipts to Accounts Payable for reimbursement to employee.