



PIEDMONT PUBLIC SCHOOLS OVERNIGHT TRAVEL REQUEST

APPLICANT DETAILS

EMPLOYEE NAME: _____ PHONE NUMBER: _____

EMAIL: _____ SCHOOL SITE: _____

GROUP: (IF APPLICABLE) _____ NUMBER OF STUDENTS: (IF APPLICABLE) _____

ADDITIONAL STAFF AND/OR CHAPERONES: _____

TRAVEL/EVENT DETAILS

FIRST DAY OF TRAVEL: _____ LAST DAY OF TRAVEL: _____

NAME OF EVENT: _____ EVENT LOCATION: _____

PURPOSE OF EVENT: _____

District transportation needed

ESTIMATED TRAVEL COSTS

AIRFARE \$	_____
REGISTRATION \$	_____
<small>(Conference or Seminar)</small>	
ACCOMMODATIONS \$	_____
MEALS \$	_____
OTHER \$	_____
ESTIMATED TOTAL COST \$	_____

FUND USED TO
PAY FOR TRIP: _____

APPLICANT CONFIRMATION & SIGNATURE

- I confirm that I have made arrangements to cover my teaching/supervision/duties for my absence.
- I confirm the information in this document to be true to the best of my knowledge.

APPLICANT SIGNATURE

DATE

APPROVAL & SIGNATURES

I approve the travel arrangements and estimated travel costs indicated above.

SUPERVISOR SIGNATURE DATE

SUPERINTENDENT SIGNATURE DATE

BOARD OF EDUCATION MEMBER SIGNATURE DATE



PIEDMONT PUBLIC SCHOOLS

OVERNIGHT TRAVEL REQUEST

TRAVEL FORM CHECKLIST

- Complete and Sign Job Related Overnight Travel Request Form.
 - Make sure to list ALL staff that may travel on the "Sponsor" field
- Have Principal or Supervisor approve/sign form
- Send form and checklist to Sandra Lemaster in Human Resources for board agenda
- Send travel information to Jennifer Fuller and Megan Davis in the finance office
 - Link to website with travel information.
 - If there are not conference hotels send minimum of 2 choices
 - Check in and Check out dates
 - Number of rooms needed with rooming list
 - If flying include:
 - preferred time of travel (ie: early morning, evening)
 - copy of driver's license or passport
- Submit requisitions in the appropriate financial software for all travel related expenses.
 - If vendor is not listed, email Megan Davis their information.

COMPLETED BY (PRINTED NAME)

DATE