

## Travel Reimbursement Form

**This page is to be filled out AFTER the event.** This form is to be used to reimburse expenses incurred while attending a PDC conference or activity. Reimbursement will be made upon receipt and approval of the principal/PDC at the next Board of Education meeting. Please submit the form to the building secretary. **No reimbursement payment will be made until the entire form is complete.**

**How will you implement what you have learned to meet the designated objective?**

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**Explain how you will evaluate the impact of your participation in the activity on student achievement. Attach any documentation that you feel is pertinent.**

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**Reimbursement Payable to:** \_\_\_\_\_

**Meeting:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Dates:** \_\_\_\_\_

Expenses actually incurred for which reimbursement is requested:

**(RECEIPTS REQUIRED- MUST be ITEMIZED or reimbursement will not be made!)**

**Mileage**      \$ \_\_\_\_\_ (\$0.40/mile, mileage figured with standardized chart)

**Meals**      \$ \_\_\_\_\_ (Maximum limits: \$5 breakfast, \$7 lunch, \$10 dinner or  
\$22 for entire day)

**Other**      \$ \_\_\_\_\_ (Please specify)

**TOTAL \$** \_\_\_\_\_

**Payee Signature** \_\_\_\_\_

**Principal Signature** \_\_\_\_\_