



TRAVEL AUTHORIZATION

Form will be returned if incomplete/Any changes will require a new form

Employee Legal Name (exactly as it appears on your driver's license)	Employee Cell Number:	Date:
District Position/Title:	Campus/Dept.	

Name of Conference, Workshop, Seminar:	
Destination (City, State)	Departure Date:
Conference Dates:	Return Date:
Registration Fee: \$ _____ (attach a copy of processed <u>registration & agenda</u>) Paid with PO #: _____ Number of Hotel nights: _____ Number of Hotel rooms: _____	☐ CISD Vehicle (reserve via Eduphoria) ☐ Personal Vehicle ☐ Bus ☐ Flight (attach copy of driver's license) ☒ Morning ☐ Noon ☐ Evening Rental ☐ Car ☐ Morning ☐ Noon ☐ Evening ☐ I will car-pool with: _____ Total in your Budget: _____ Verified by: _____

Preferred Hotel: _____ ☐ King ☐ 2 Queen	Estimated Expenses	Actual Expenses
Per Diem Travel Days (travel to/from) = 2 Days x \$30 = \$60	\$	\$
Number of Additional Full Days _____ x \$45 per day	\$	\$
Same day travel (one way) over 50 miles = \$30	\$	\$
Personal Car: # of Miles _____ x .30¢ per mile (attach map: start at 1900 Crowley Pride Drive Fort Worth, TX. 76036)	\$	\$
Misc. Expenses: gas, parking fees, cab, Uber, Lyft, etc. (post travel, send receipts)	\$	\$
TITLE/GRANT FUNDS & STUDENT TRAVEL MUST INCLUDE RECEIPTS	TOTAL	\$

For STUDENT TRAVEL attach <u>agenda</u> and <u>student roster</u>			
# of Students _____ # of Sponsors _____ # of Bus Drivers _____	Advanced Expenses	Actual Expenses	
Fuel Estimate: # of Miles _____ x .30¢ per mile (attach map: start at 1900 Crowley Pride Drive, Ft. Worth TX. 76036)	\$	\$	
# of Student Meals/Sponsor/Bus Driver Meals _____ x \$15.00 (per meal)	\$	\$	
Purpose of Student Trip:	Total	\$	
Send this completed form to travel@crowley.k12.tx.us along with supporting documents (registration/agenda), map quest, driver's license if applicable & any other pertinent information			

Budget code must be complete/Changes must be submitted to dept. secretary/Changes require a new form

FUND	FUNC	OBJ	SUB OBJ	ORG	YEAR	PROG
		6411				
		6412				
461						

PRE-TRAVEL AUTHORIZATION/ALL SIGNATURES ARE REQUIRED BEFORE TRAVEL IS BOOKED		
Signature/Person Traveling:	Date	
Signature/Supervisor:	Date	
Signature/Budget Owner:	Group/Dept. Number	Date