

Conference Attendance Form Checklist

Board Policy 3350(a) & 4133 states all travel to attend a conference requires preapproval from the Superintendent or designee prior to traveling. Pre-approval can be obtained by completing a Conference Attendance Form. All travel out of county requires a Conference Attendance Form approval. Approval is also needed for any travel in the county that is not a part of your regular job duties, such as travel to a local conference.

Prior to Travel



- ✓ Complete all sections of the Conference Attendance Form with the exception of the **Actual Costs (Out of Pocket)** and **Request for Reimbursement** section.
- ✓ Attach copy of agenda/tentative agenda & registration form to show the educational purpose of your travel.
- ✓ Complete the **Budget Number for Reimbursement** section including any special funding approvals.
- ✓ Obtain appropriate signatures in the **Request/Approval to Attend Conference** section.
- The Conference Attendance Form should be returned to you after it has been approved-
- ✓ Traveling out of state? **All out-of-state travel shall be approved in advance by the Board.** Board approval **MUST** be attached to your Conference Attendance Form.

Travel Approval



- Once you have received approval to travel, you can begin making conference arrangements-
- ✓ For expenses that VUSD will pay for directly, such as registration, airfare, hotel, rental car, etc. Process requisition for a PO. Include the following back-up:
 - -Registration Form
 - -Conference Attendance Form
 - -Agenda
 - -Board Approval (if out of state)
- ✓ Keep a copy of the PO to attach to the Conference Attendance Reimbursement form.

During Travel



- ✓ For travel by personal vehicle – keep track of mileage to the conference. District credit cards should **NOT** be used to purchase gas for a personal vehicle. District credit cards should **ONLY** be used to purchase gas for a district vehicle. See *P-Card guidelines* for reference.
- ✓ Keep **ITEMIZED** receipts for meals, parking, baggage fees, etc.
- ✓ Meals are not to exceed **\$69.00/day** and tips are allowed up to 20% of the subtotal (prior to tax).
- ✓ Non-reimbursable items included in Board Policy include alcohol, entertainment, laundry/dry cleaning, auto repairs, gifts, expenses of any family member who is accompanying the employee on the district-related business, and personal losses or traffic violation fees incurred while on district business.

Upon Return



- ✓ Employee should complete **Actual Costs (Out of Pocket)** section of Conference Attendance Form. Indicate costs that employee paid for out of pocket such as parking, meals, etc.
- ✓ Attach ALL **original itemized receipts** for **employee paid expenses**.
- ✓ Obtain appropriate signatures in the **Request for Reimbursement** section.
- ✓ Turn in to Finance – Accounts Payable department for processing.

Additional questions?

Please refer to Board Policy 3350(a) & 4133 or contact Finance Department at 901.8074.





VISALIA UNIFIED SCHOOL DISTRICT

Conference Attendance Form

FINANCE USE ONLY:

VE# _____

Name: _____ Address: _____ School/Dept: _____

(Last, First, Middle)

Location: _____ Departure Date & Time: _____ Return Date & Time: _____

Title of Conference: _____

Prepared By: _____ Phone/Email: _____

<i>The following checklist must be completed with necessary forms attached to this request.</i>	Estimated Costs	Actual Costs (Out of Pocket)
Registration ☐ Prepay (Attach PO for prepaid registration) ☐ Reimburse (paid by employee)	\$	\$
Lodging ☐ Prepay (Attach PO for prepaid lodging) ☐ Reimburse (paid by employee)	\$	\$
Travel Costs ☐ Personal (miles _____ x rate _____) or ☐ District (attach transportation request form) ☐ Other	\$	\$
Meals including tips (itemized receipts required) (Should not exceed \$69.00/day)	\$	\$
Other costs (itemized receipts required)	\$	\$
TOTAL	\$	\$

BUDGET NUMBER FOR REIMBURSEMENT ITEMS

FUND	RESOURCE	PY	GOAL	FUNCTION	OBJECT	SITE	TYPE	MGR	%	AMOUNT
					52000					

Special Funding Approval: _____ Date: _____

REQUEST/APPROVAL TO ATTEND CONFERENCE

Signature of Employee Date

Signature of Principal or Director Date

Signature of Cabinet Member Date

REQUEST FOR REIMBURSEMENT

I hereby certify that the above expenses are actual and were necessarily incurred in the performance of my official duty and further that no part of the above claim has heretofore been paid:

Signature of Employee Date

Signature of Principal or Director Date