



Indian River School District

Travel/Professional Development Authorization Form

Name: _____ Date: _____
 School/Department: _____ Position: _____
 Conference/PD Name: _____
 Location: _____ Date(s): _____ to _____

All completed forms shall be submitted to the district office as soon as possible but no fewer than 20 business days before the due date of the registration payment. If the traveling employee does not currently have a State of Delaware Credit Card (Pcard), the employee is to indicate so on the completed form and must submit the form at least 30 business days prior to the travel.

Purpose/Description: (i.e. Related to District Goals/School Staff Development Plan)

Estimated Costs:	Other Cost: (Provide Detail)
Registration/Conference Fees:	Explanation for Other Cost:
Common Carrier:	
Mileage:	
Lodging:	
Meals:	
Tolls, Parking, Taxi, etc.:	
Substitute:	Does Employee have a Pcard?
Total Estimated Cost:	Funding Source:

By signing this form, the Employee agrees (1) to reimburse IRSD for all incurred costs if they do not attend the scheduled trip for an unapproved reason and (2) to comply with all applicable State of Delaware and Indian River School District travel policies and procedures.

Employee Signature:		Date:	
Approvals:			
Supervisor Signature:		Date:	<input type="checkbox"/> APPROVE <input type="checkbox"/> DENY
IREC Director/Supervisor:		Date:	<input type="checkbox"/> APPROVE <input type="checkbox"/> DENY
Director of Business & Finance:		Date:	<input type="checkbox"/> APPROVE <input type="checkbox"/> DENY
Superintendent:		Date:	<input type="checkbox"/> APPROVE <input type="checkbox"/> DENY

Administrative Assistant Use Only:

BUDREF	FUND	DEPTID	OPUNIT	APPR	ACCT	PGM	SCHCODE
PCBU	Project	Activity					