

PROFESSIONAL MEETING REQUEST FORM

Name _____

School _____ Date _____

Date(s) of meeting: _____

Location of meeting: _____

Nature of conference or professional meeting. Briefly describe:

Estimated Expenses

Mileage _____ miles @ _____ per mile \$ _____

Plane, bus, train and/or taxi fares \$ _____

Registration fees \$ _____

Meals (not to exceed \$10 Breakfast, \$15 Lunch, \$25 Dinner per day. \$ _____

No voluntary gratuities can be included in the reimbursement.

No meal reimbursements allowed for meals included in the meeting registration fee.)

Parking \$ _____

Lodging (Not to exceed \$125 per room per night for all reimbursements. \$ _____

Lodging is only for locations beyond 200 miles from the district or multi-day meetings.

Multiple employees attending the same meeting must share a room, if feasible, or have the normally allowed reimbursement reduced by 50%.)

TOTAL ESTIMATED EXPENSES \$ _____

Employee's Signature Date

Supervisor/Principal's Approval Date

Superintendent's Approval Date

The employee must pay all expenses and submit itemized receipts along with the Professional Meeting Request form for reimbursement. The employee's signature indicates an agreement to abide by the terms in Policy 3243 and Policy 3440 and AG 3243, AG 3440A, AG 3440B and AG 3440C.

Please accompany this request form with a requisition to cover the estimated expenses.

There is no meal reimbursement for a one day meeting and under no circumstances will employees be reimbursed for the purchase of alcoholic beverages.

The accrual of personal frequent-flyer mile, hotel "bonus points", credit card "rewards" or any other reward under similar affinity programs (including credit points or rewards directed to non-profit organizations) is strictly prohibited.