

SAN PASQUAL VALLEY UNIFIED SCHOOL DISTRICT

REQUEST FOR CONFERENCE/FIELD TRIP/VIRTUAL MEETING

Staff Name(s): _____
Conference/Trip Title: _____
Conference Dates: _____ **Travel Dates:** _____
Location: _____

	Totals \$
Registration:	
Hotel Cost: (include tax) Nights () Rooms () Price=	
Staff Meals: breakfast (4) \$16.00- lunch(4) \$ 18.00= Dinner (4) \$ 30.00 =	
Breakfast Lunch Dinner	
Same day trips will require meal receipts and a reimbursement form	
Transportation fuel cost per mile Van=\$.50 Bus= \$ 4.05	
Flights –	
Shuttle	
Parking / Other additional cost. Additional/overtime pay	
TOTAL	

Will you use a District Vehicle Yes ____ No ____ Bus____ Van ____ (If no, mileage will not be reimbursed unless a district vehicle is not available) School Dude Transportation requested date: **Include a copy of school dude submission.**

Will you require a substitute: Yes No **if yes, submit lesson plans to office and request coverage to District clerk.**

Did you attach materials to conference request: **yes/no**

Cafeteria Request for student sack lunches and sack breakfast: Yes ____ No ____ **if yes, include copy of request.**

Signature of Employee: _____ **Date:** _____

OFFICE USE

Approved
 Disapproved
Source of Funding: _____

Principal/Supervisor Date

DISTRICT OFFICE USE

Approved
 Disapproved

District Office Date

Date Reviewed By Board

INSTRUCTIONS: This form is to be completed prior to conference/workshop attendance. Submit all copies to immediate supervisor who will give initial approval and forward all copies to superintendent for final approval. No travel claims, advances, or credit card charges will be paid without submission of this form in advance.