TRAVEL REQUEST FORM (POLICY 546.00F)

MINIDOKA COUNTY JOINT SCHOOL DISTRICT #331

TITLE OF CONFERENCE	DESTINATION	CHECK ONE			
2025 National Migrant Education Conference	San Francisco, CA	IN RADIUS		OUT OF RADIUS	X
PURPOSE OF CONFERENCE	REPORT TO: (CIRCLE ONE)	STUDENT TRAVEL OVERNIGHT Y/N			
Migrant Program	BOARD STAFF TEAM	# STUDENTS		# CHAPERONES	

REQUESTS THAT ARE REQUIRED BY GRANT, GOVERNMENTAL RULES AND REGULATIONS, OR CONSIDERED IMPERATIVE TO THE OPERATION OF THE DISTRICT ARE SUBJECT TO APPROVAL. THE DEADLINE FOR ALL TRIP REQUESTS ARE THE FIRST MONDAY EACH MONTH. OUT OF RADIUS AND STUDENT REQUESTS ARE REVIEWED AT THE SEPTEMBER BOARD MEETING.

FUNDING SOURCE (MARK ONE)					
DISTRICT PD		SPECIAL ED		ACTIVITIES	
FEDERAL	X	SAFETY		SCHOOL IMPROVEMENT	

NAMES OF ATTENDEES	DATE(S) OF TRAVEL	MEALS: BREAKFAST $10	MEALS: LUNCH $15	MEALS: DINNER IN-STATE $20 OUT-STATE $30	MEALS: DAILY TOTAL	MILEAGE: DESTINATION CITY OR AIRPORT	MILEAGE: MILES	MILEAGE: TOTAL .67 PER MILE	Y/N: DISTRICT CAR AVAILABLE	PARKING BAGGAGE	RENTAL CAR SHUTTLE TAXI	SUB	REGISTRATION	AIRFARE	LODGING	TOTAL STAFF REIMB
Veronica Granillo	13-Apr-24	$ 10	$ 15	$ 30	$ 55	Boise	326	$218.42		$ 100	$ 50		$ 450	$ 450	$ 1,200	$ 438.42
	14-Apr-24	$ 10	$ 15	$ 30	$ 55											
	15-Apr-24	$ 10	$ 15	$ -	$ 25											
	16-Apr-24	$ 10	$ -	$ 30	$ 40											
	17-Apr-24	$ 10	$ 15	$ 20	$ 45											
		$ -	$ -	$ -	$ -											
Marla Garcia	13-Apr-24	$ 10	$ 15	$ 30	$ 55	Salt Lake City	362	$242.54		$ 100	$ 50		$ 450	$ 450	$ 1,200	$ 462.54
	14-Apr-24	$ 10	$ 15	$ 30	$ 55											
	15-Apr-24	$ 10	$ 15	$ -	$ 25											
	16-Apr-24	$ 10	$ -	$ 30	$ 40											
	17-Apr-24	$ 10	$ 15	$ 20	$ 45											
		$ -	$ -	$ -	$ -											
April Zepeda	13-Apr-24	$ 10	$ 15	$ 30	$ 55			$ -		$ -	$ 50		$ 450	$ 450	$ 1,200	$ 220.00
	14-Apr-24	$ 10	$ 15	$ 30	$ 55											
	15-Apr-24	$ 10	$ 15	$ -	$ 25											
	16-Apr-24	$ 10	$ -	$ 30	$ 40											
	17-Apr-24	$ 10	$ 15	$ 20	$ 45											
		$ -	$ -	$ -	$ -											
TBD	13-Apr-24	$ 10	$ 15	$ 30	$ 55	Boise	326	$218.42		$ 100	$ 50		$ 450	$ 450	$ 1,200	$ 438.42
	14-Apr-24	$ 10	$ 15	$ 30	$ 55											
	15-Apr-24	$ 10	$ 15	$ -	$ 25											
	16-Apr-24	$ 10	$ -	$ 30	$ 40											
	17-Apr-24	$ 10	$ 15	$ 20	$ 45											
		$ -	$ -	$ -	$ -											
TBD	13-Apr-24	$ 10	$ 15	$ 30	$ 55			$ -		$ -	$ 50		$ 450	$ 450	$ 1,200	$ 220.00
	14-Apr-24	$ 10	$ 15	$ 30	$ 55											
	15-Apr-24	$ 10	$ 15	$ -	$ 25											
	16-Apr-24	$ 10	$ -	$ 30	$ 40											
	17-Apr-24	$ 10	$ 15	$ 20	$ 45											
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					$ 1,100			$ 679		$ 300	$ 250	$ -	$ 2,250	$ 2,250	$ 6,000	

OFFICE USE ONLY

ALL FORMS MUST BE TYPED. INCOMPLETE TRAVEL REQUESTS WILL BE RETURNED FOR ADDITIONAL INFORMATION. PERDIEM REIMBURSED AHEAD FOR OUT OF RADIUS TRAVEL. RECIEPTS REQUIRED FOR NON PERDIEM EXPENSES INCURRED.

BUDGET CODE: _____ PROGRAM DIRECTOR INITIAL: _____ TOTAL COST OF REQUEST $ 12,829.38

SIGNATURE(S) OF SUPERVISOR/ADMINISTRATOR: Ellen Austin

SIGNATURE OF SUPERINTENDENT: _____ BOARD APPROVAL DATE _____