

TRAVEL REQUEST FORM (POLICY 546.00F)

MINIDOKA COUNTY JOINT SCHOOL DISTRICT #331

June #1

| | | | | | |
|--------------------------|----------------------------|------------------------------|--|--------------|---|
| TITLE OF CONFERENCE | DESTINATION | CHECK ONE | | | |
| 2019 National Migrant | New Orleans, LA | IN-RADIUS | | OUT-RADIUS | X |
| PURPOSE OF CONFERENCE | REPORT TO: (CIRCLE ONE) | STUDENT TRAVEL OVERNIGHT Y/N | | | |
| Professional Development | 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. REVIEWED AT THE SEPTEMBER BOARD MEETING.

OUT OF RADIUS AND STUDENT REQUESTS ARE

FUNDING SOURCE (MARK ONE)

| | | | | | |
|-------------|---------|------------|--|------------|--|
| DISTRICT PD | | SPECIAL ED | | ACTIVITIES | |
| FEDERAL | Migrant | SAFETY | | VOCATION | |

| NAMES OF ATTENDEES | DATE(S) OF TRAVEL | MEALS | | | | MILEAGE | | Y/N | PARKING BAGGAGE | RENTAL CAR SHUTTLE TAXI | SUB | REGISTRATION | AIRFARE | LODGING | TOTAL STAFF REIMB |
|----------------------|-------------------|----------------|------------|----------------------------------|-------------|-----------------------------|-------|-----|-----------------|-------------------------|-------|--------------|---------|---------|-------------------|
| | | BREAKFAST \$10 | LUNCH \$15 | DINNER STATE \$20 OUT-STATE \$30 | DAILY TOTAL | DESTINATION CITY OR AIRPORT | MILES | | | | | | | | |
| Jamie Arteaga | 1-May-19 | | \$ 15 | \$ 30 | \$ 45 | Salt Lake City | 350 | No | 100 | 50 | | 375 | 450 | 705 | 367.5 |
| | 2-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 3-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 4-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | | | | | \$ - | | | | | | | | | | |
| Michele Widmier | 1-May-19 | | \$ 15 | \$ 30 | \$ 45 | | | | \$ 100 | \$ 50 | | \$ 375 | \$ 450 | \$ 705 | \$ 360 |
| | 2-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 3-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 4-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | | | | | \$ - | | | | | | | | | | |
| Maria Renz | 1-May-19 | | \$ 15 | \$ 30 | \$ 45 | | | | \$ 100 | \$ 50 | \$ 50 | \$ 375 | \$ 450 | \$ 705 | \$ 360 |
| | 2-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 3-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 4-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | | | | | \$ - | | | | | | | | | | |
| Parent 1 (potential) | 1-May-19 | | \$ 15 | \$ 30 | \$ 45 | | | | \$ 100 | \$ 50 | | \$ 375 | \$ 450 | \$ 705 | \$ 360 |
| | 2-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 3-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 4-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | | | | | \$ - | | | | | | | | | | |
| Parent 2 (potential) | 1-May-19 | | \$ 15 | \$ 30 | \$ 45 | | | | \$ 100 | \$ 50 | | \$ 375 | \$ 450 | \$ 705 | \$ 360 |
| | 2-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 3-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 4-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | | | | | \$ - | | | | | | | | | | |
| Parent 3 (potential) | 1-May-19 | | \$ 15 | \$ 30 | \$ 45 | | | | \$ 100 | \$ 50 | | \$ 375 | \$ 450 | \$ 705 | \$ 360 |
| | 2-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 3-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | 4-May-19 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | |
| | | | | | \$ - | | | | | | | | | | |

| | | | |
|--|---------------------|---------------------------|------------------------------------|
| OFFICE USE ONLY | | PERDIEM REIMBURSED | |
| ALL FORMS MUST BE TYPED. INCOMPLETE TRAVEL REQUESTS WILL BE RETURNED FOR ADDITIONAL INFORMATION. | | | |
| AHEAD FOR OUT OF RADIUS TRAVEL. RECEIPTS REQUIRED FOR NON PERDIEM EXPENSES INCURRED. | | | |
| BUDGET CODE: | 253- Migrant budget | PROGRAM DIRECTOR INITIAL: | SL TOTAL COST OF REQUEST \$ 11,548 |
| SIGNATURE(S) OF SUPERVISOR/ADMINISTRATOR: | | 6/1/2018 8:05:33 AM PDT | |
| SIGNATURE OF SUPERINTENDENT: | | 6/1/2018 10:16:55 AM PDT | BOARD APPROVAL DATE |

TRAVEL REQUEST FORM (POLICY 546.00F)

MINIDOKA COUNTY JOINT SCHOOL DISTRICT #331

June #2

| | | | | | | | | | | | | | | | | | | |
|---|-------------------|----------------|------------|--|-------------|---|-------|--------------------|-----|-----------------|-------------------------|--------|---------------------------|---------|------------|-------------------|------------|--|
| TITLE OF CONFERENCE 2018 MBA CONCLAVE CURRICULUM & TEACHING PURPOSE OF CONFERENCE PROFESSIONAL DEVELOPMENT | | | | | | DESTINATION KANSAS CITY, MO REPORT TO: (CIRCLE ONE) BOARD STAFF TEAM | | | | CHECK ONE | | | | | | | | |
| | | | | | | IN-RADIUS | | | | OUT-RADIUS | | X | | | | | | |
| | | | | | | STUDENT TRAVEL OVERNIGHT Y/N | | | | | | | | | | | | |
| | | | | | | # 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. AND STUDENT REQUESTS ARE REVIEWED AT THE SEPTEMBER BOARD MEETING. | | | | | | | | | | | | | FUNDING SOURCE (MARK ONE) | | | | | |
| DISTRICT PD | | | | | | | | | | | | | X | | SPECIAL ED | | ACTIVITIES | |
| FEDERAL | | | | | | | | | | | | | | | SAFETY | | VOCATION | |
| NAMES OF ATTENDEES | DATE(S) OF TRAVEL | MEALS | | | | MILEAGE | | | Y/N | PARKING BAGGAGE | RENTAL CAR SHUTTLE TAXI | SUB | REGISTRATION | AIRFARE | LODGING | TOTAL STAFF REIMB | | |
| | | BREAKFAST \$10 | LUNCH \$15 | DINNER IN-STATE \$20 OUT-STATE \$30 | DAILY TOTAL | DESTINATION CITY OR AIRPORT | MILES | TOTAL .45 PER MILE | | | | | | | | | | |
| SARAH PELAYO | 4-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | Twin | 94 | \$ 42 | N | \$ 50 | \$ 50 | \$ 351 | \$ 529 | \$ 520 | \$ 850 | \$ 187 | | |
| | 5-Oct-18 | | | \$ 30 | \$ 30 | | | | | | | | | | | | | |
| | 6-Oct-18 | | | \$ 30 | \$ 30 | | | | | | | | | | | | | |
| | 7-Oct-18 | | | \$ 30 | \$ 30 | | | | | | | | | | | | | |
| | 8-Oct-18 | | \$ 15 | \$ 30 | \$ 45 | | | | | | | | | | | | | |
| | 9-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | \$ - | | | | | | | | \$ 100 | | |
| | | | | \$ - | \$ - | | | | | | | | | | | | | |
| | | | | \$ - | \$ - | | | | | | | | | | | | | |
| | | | | \$ - | \$ - | | | | | | | | | | | | | |
| | | | | \$ - | \$ - | | | | | | | | | | | | | |
| SHERYL STEVENSON | 4-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | \$ - | N | \$ 50 | | \$ 351 | \$ 529 | \$ 520 | \$ 850 | \$ 195 | | |
| | 5-Oct-18 | | | \$ 30 | \$ 30 | | | | | | | | | | | | | |
| | 6-Oct-18 | | | \$ 30 | \$ 30 | | | | | | | | | | | | | |
| | 7-Oct-18 | | | \$ 30 | \$ 30 | | | | | | | | | | | | | |
| | 8-Oct-18 | | \$ 15 | \$ 30 | \$ 45 | | | | | | | | | | | | | |
| | 9-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | \$ - | | | | | | | | \$ 100 | | |
| | | | | \$ - | \$ - | | | | | | | | | | | | | |
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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: | SS | TOTAL COST OF REQUEST | \$ 5,182 |
| SIGNATURE(S) OF SUPERVISOR/ADMINISTRATOR: | | DocuSigned by: Kelly Arnett | | |
| | | 6/11/2018 9:32:26 AM PDT | | |
| SIGNATURE OF SUPERINTENDENT: | | 6/12/2018 10:49:58 AM PDT | | BOARD APPROVAL DATE |
| | | | | |


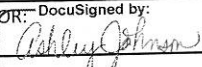
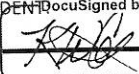
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TRAVEL REQUEST FORM (POLICY 546.00F)

MINIDOKA COUNTY JOINT SCHOOL DISTRICT #331

June #3

| | | | | | | | | | | | | | | | | | |
|---|-------------------|----------------|------------|----------------------------------|-----------------------------|--|---------|--------------------|------------------------|-----|-----------------|---|--------|--------------|---------|---------|-------------------|
| TITLE OF CONFERENCE Parenting the Love & Logic Way Instructor Training PURPOSE OF CONFERENCE Professional Development | | | | | | DESTINATION Golden, Co REPORT TO: (CIRCLE ONE) BOARD STAFF TEAM | | | | | | CHECK ONE IN-RADIUS <input type="checkbox"/> OUT-RADIUS <input checked="" type="checkbox"/> x STUDENT TRAVEL OVERNIGHT Y/N # STUDENTS <input type="checkbox"/> # CHAPERONES <input type="checkbox"/> | | | | | |
| 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. REQUESTS REVIEWED AT THE SEPTEMBER BOARD MEETING. | | | | | | | | | | | | FUNDING SOURCE (MARK ONE) | | | | | |
| DISTRICT PD <input type="checkbox"/> SPECIAL ED <input type="checkbox"/> ACTIVITIES <input type="checkbox"/> | | | | | | | | | | | | FEDERAL <input type="checkbox"/> SAFETY <input type="checkbox"/> VOCATION <input type="checkbox"/> | | | | | |
| NAMES OF ATTENDEES | DATE(S) OF TRAVEL | MEALS | | | | IN-DAILY TOTAL | MILEAGE | | | Y/N | PARKING BAGGAGE | RENTAL CAR SHUTTLE TAXI | SUB | REGISTRATION | AIRFARE | LODGING | TOTAL STAFF REIMB |
| | | BREAKFAST \$10 | LUNCH \$15 | DINNER STATE \$20 OUT-STATE \$30 | DESTINATION CITY OR AIRPORT | | MILES | TOTAL .45 PER MILE | DISTRICT CAR AVAILABLE | | | | | | | | |
| TBD 1 Trainer | 10-Oct-18 | | | \$ 30 | \$ 30 | SLC | 300 | \$ 135 | Yes | | \$ 100 | | \$ 425 | \$ 250 | \$ 435 | \$ 320 | |
| | 11-Oct-18 | | \$ 15 | \$ 30 | \$ 45 | | | | | | | | | | | | |
| | 12-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | | | |
| | 13-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | | | |
| | | | | | \$ - | | | | | | | | | | | | |
| TBD 2 Trainer | 10-Oct-18 | | | \$ 30 | \$ 30 | | | \$ - | | | \$ 100 | | \$ 425 | \$ 250 | \$ 435 | \$ 285 | |
| | 11-Oct-18 | | \$ 15 | \$ 30 | \$ 45 | | | | | | | | | | | | |
| | 12-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | | | |
| | 13-Oct-18 | \$ 10 | \$ 15 | \$ 30 | \$ 55 | | | | | | | | | | | | |
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| OFFICE USE ONLY | | | | | | | | | | | | PERDIEM REIMBURSED | | | | | |
| ALL FORMS MUST BE TYPED. INCOMPLETE TRAVEL REQUESTS WILL BE RETURNED FOR ADDITIONAL INFORMATION. | | | | | | | | | | | | | | | | | |
| AHEAD FOR OUT OF RADIUS TRAVEL. RECEIPTS REQUIRED FOR NON PERDIEM EXPENSES INCURRED. | | | | | | | | | | | | | | | | | |
| BUDGET CODE: Professional Development 100 or 251 | | | | | | PROGRAM DIRECTOR INITIAL:  | | | | | | TOTAL COST OF REQUEST \$ 2,925 | | | | | |
| SIGNATURE(S) OF SUPERVISOR/ADMINISTRATOR: DocuSigned by:  6/1/2018 3:15:00 PM PDT | | | | | | | | | | | | | | | | | |
| SIGNATURE OF SUPERINTENDENT: DocuSigned by:  491EDCBC308A4AD... 6/4/2018 7:18:28 AM PDT | | | | | | | | | | | | | | | | | |
| BOARD APPROVAL DATE | | | | | | | | | | | | | | | | | |