

TRAVEL REQUEST FORM (POLICY 546.00F)

MINIDOKA COUNTY JOINT SCHOOL DISTRICT #331

TITLE OF CONFERENCE EAST MINICO STUDENT LAGOON TRIP PURPOSE OF CONFERENCE STUDENT TRAVEL - EAST MINICO	DESTINATION FARMINGTON UTAH REPORT TO: (CIRCLE ONE) BOARD STAFF TEAM	CHECK ONE <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">IN RADIUS</td> <td style="width: 25%;"></td> <td style="width: 25%;">OUT OF RADIUS</td> <td style="width: 25%; text-align: center;">X</td> </tr> <tr> <td colspan="4" style="text-align: center;">STUDENT TRAVEL OVERNIGHT Y/N</td> </tr> <tr> <td># STUDENTS</td> <td style="text-align: center;">X</td> <td># CHAPERONES</td> <td style="text-align: center;">X</td> </tr> </table>	IN RADIUS		OUT OF RADIUS	X	STUDENT TRAVEL OVERNIGHT Y/N				# STUDENTS	X	# CHAPERONES	X
IN RADIUS		OUT OF RADIUS	X											
STUDENT TRAVEL OVERNIGHT Y/N														
# STUDENTS	X	# CHAPERONES	X											

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.

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									
EAST MINICO STUDENTS AND CHAPERONES	23-May-19				\$ -	UTAH		\$ -	YES BUSES \$2,000				\$55 each			\$ 7500	
100 Students 5 staff					\$ -			\$ -									\$ -
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STUDENT ACTIVITY FUNDS/ CLUB FUNDRAISERS/ STUDENT PAYMENTS COVER ADMISSION TO PARK

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

BUDGET CODE: 100.621.0380 PROGRAM DIRECTOR INITIAL: [Signature] TOTAL COST OF REQUEST: \$ 7500-

SIGNATURE(S) OF SUPERVISOR/ADMINISTRATOR: DocuSigned by: Terry Merrill 4/4/2019

SIGNATURE OF SUPERINTENDENT: DocuSigned by: [Signature] 4/5/2019 BOARD APPROVAL DATE: Bonnie Kleins 4-15-19

