| TITLE OF CONFERENCE | DESTINATION | CHECK ONE | | | |
|---|---|---|---|---|---|
| **BPA- STATE CONFERENCE** | **BOISE, ID** | IN-RADIUS | X | OUT-RADIUS | |
| PURPOSE OF CONFERENCE | REPORT TO: (CIRCLE ONE) | | | STUDENT TRAVEL OVERNIGHT Y/N | Y |
| **STUDENT LEADERSHIP CONVENTION** | BOARD STAFF TEAM | # STUDENTS | 3 | # CHAPERONES | 2 |

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

**VOCATION-CLUB FUNDS**

| 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 PER MILE .725 | PARKING/ BAGGAGE | RENTAL CAR, SHUTTLE, TAXI | SUB | REGISTRATION | AIRFARE | LODGING | TOTAL STAFF REIMB |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BUS DRIVER MEALS & HOTEL (IF APPLICABLE) | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | $ - .00 | | | | | | | $ - .00 |
| Sheryl Stevenson | 2-Mar-26 | $ 10 | $ 15 | $ 30 | $ 55 | | | | | | | | | | |
| | 3-Mar-26 | | $ 15 | $ 30 | $ 45 | | | | | | | | | | |
| | 4-Mar-26 | | $ 15 | $ 30 | $ 45 | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | $ - .00 | | | | $ 55 | | $ 107.00 | $ 145.00 |
| Sarah Pelayo | 2-Mar-26 | $ 10 | $ 15 | $ 30 | $ 55 | | | | | | | | | | |
| | 3-Mar-26 | | $ 15 | $ 30 | $ 45 | | | | | | | | | | |
| | 4-Mar-26 | | $ 15 | $ 30 | $ 45 | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | $ - .00 | | | | $ 55 | | $ 107.00 | $ 145.00 |
| 3 Students | 2-Mar-26 | | | | $ - | | | | | | | | | | |
| | 3-Mar-26 | | | | $ - | | | | | | | | | | |
| | 4-Mar-26 | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | $ - .00 | | | | $ 165 | | $ 374.00 | $ - .00 |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | $ - .00 | | | | | | | $ - .00 |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | | | | | | | | |
| | | | | | $ - | | | $ - .00 | | | | | | | $ - .00 |
| | | | | | $ 290 | | | $ - .00 | $ - | $ - | $ - | $ 275 | $ - | $ 588.00 | |

ALL FORMS MUST BE TYPED. INCOMPLETE TRAVEL REQUESTS WILL BE RETURNED FOR ADDITIONAL INFORMATION.

BUDGET CODE:

PROGRAM DIRECTOR INITIAL:

TOTAL COST OF REQUEST $ 1,153.00

SIGNATURE(S) OF SUPERVISOR/ADMINISTRATOR: ok per Maggi

SIGNATURE OF SUPERINTENDENT:

BOARD APPROVAL DATE