

ENEMY SWIM DAY SCHOOL – TOKA NUWAN WAYAWAPI

INSTRUCTIONS FOR STAFF TRAINING/TRAVEL FORM

Travel advances may be authorized for travelers who will be away from the school overnight on necessary travel. Travelers who expect to complete their trip within the same calendar day will not be authorized a travel advance. Each request for travel advance requires a separate travel request for each person.

INSTRUCTIONS

All travel requests must be submitted to the Superintendent. Any travel requests requiring airfare must be submitted at a minimum of 8 weeks in advance to allow for flight arrangements. All other travel requests need to be submitted 4 weeks prior to travel date.

1. Traveler fills out Staff Training/Travel Form and attaches all supporting documentation.
2. Traveler signs the form and sends all originals to the Superintendent for review.
3. Traveler ensures that arrangements are made to cover their teaching and/or administrative duties during an approved absence.
4. If the travel request meets the criteria for allowed travel and budget availability, the Superintendent will present the travel request to the School Board for final approval.
5. After the request for travel is approved by the School Board, the paperwork is distributed as follows:
 - Original travel request and all documentation are forwarded from the Business Manager to the Business Assistant II.
 - Travel accommodations will be arranged by the Business Assistant II.
 - Traveler will receive itinerary and travel advance (if applicable) and Trip Report Form from the Business Assistant II.
6. The traveler must turn in a trip report with all required receipts to the Business Manager with 5 days of the trip completion.
7. Reimbursements may be made for unexpected expenditures, provided they are reasonable and school-related; documentation must be presented for approval.

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STAFF TRAINING/TRAVEL REQUEST									
Date	Employee Name	Position	Dept.						
Purpose:									
Program Benefit:									
Location (Address, City, State)									
Date & Time of Departure:					Date & Time of Return:				
Total Number of days:									
Conference/Training Registration Vendor									
Conference/Training Registration Vendor					Conf. #:			Cost	
School Car *	Yes	No	Personal Vehicle		Yes	No	Cost:		
Airline:					Conf.#			Cost:	
Baggage Fee (each direction):			Carry On Bag			Checked Bag			Cost:
Airport Parking:			Fargo, ND			Sioux Falls, SD			Other:
Shuttle or Taxi:									Cost:
Car Rental:									Cost:
Hotel:					Conf.#			Cost:	
Per Diem/Meals (GSA Rates):					# of Days			Cost:	
Miscellaneous:									Cost:
Substitute needed	Yes	No	Cost:			# of Days			Cost:
								Estimated Expenses:	

Email request sent to Ed Johnson to reserve vehicle

Leave slip submitted

* If you are using a school vehicle for transportation, include the estimated cost of fuel

Notes on Travel

SIGNATURE(S) AND APPROVAL			
Traveler:		Date:	
Supervisor:		Date:	
Superintendent:		Date:	

Once form is complete and signed – send to Business Manager.