

MENOMINEE COUNTY  
INTERMEDIATE SCHOOL DISTRICT

# Conference/Travel Request Form

Name of Requester: \_\_\_\_\_

Conference Title: \_\_\_\_\_  
(Attach a flier that describes the conference)

Conference Date(s) \_\_\_\_\_  
*\*If funding source is known, please indicate on this form. Please complete professional development report form within five days of conference.*

Lodging Information:	<b>EIN # 38-1717561</b>
Hotel: _____	
Arrival Date: _____	
Departure Date: _____	
<input type="checkbox"/> Single Occupancy <input type="checkbox"/> Double Occupancy	
CONFIRMATION #: _____	

	<u>ESTIMATED Costs</u>
Registration	
Lodging	
Meals	
Mileage	_____ x _____ = _____
Other (specify)	
Other (specify)	
<b>TOTAL COST</b>	<b>\$</b>

\_\_\_\_\_  
(Signature of Requester)

\_\_\_\_\_  
(Date of Request)

\_\_\_\_\_  
(Authorized Signature of Pre-Approval)

\_\_\_\_\_  
(Date of Pre-Approval)

**TO BE COMPLETED AFTER CONFERENCE/TRAVEL**

	<u>ACTUAL Costs</u>	<u>Explanation of Payment</u>
Registration		<input type="checkbox"/> Paid by Requester <input type="checkbox"/> Credit Card <input type="checkbox"/> MC-ISD prepaid expense <input type="checkbox"/> Other: _____
Lodging		<input type="checkbox"/> Paid by Requester <input type="checkbox"/> Credit Card <input type="checkbox"/> MC-ISD prepaid expense <input type="checkbox"/> Other: _____
Meals		<input type="checkbox"/> Paid by Requester <input type="checkbox"/> Credit Card <input type="checkbox"/> MC-ISD prepaid expense <input type="checkbox"/> Other: _____
Mileage	_____ x _____ = _____	<input type="checkbox"/> Paid by Requester <input type="checkbox"/> Credit Card <input type="checkbox"/> MC-ISD prepaid expense <input type="checkbox"/> Other: _____
Other (specify)		<input type="checkbox"/> Paid by Requester <input type="checkbox"/> Credit Card <input type="checkbox"/> MC-ISD prepaid expense <input type="checkbox"/> Other: _____
Other (specify)		<input type="checkbox"/> Paid by Requester <input type="checkbox"/> Credit Card <input type="checkbox"/> MC-ISD prepaid expense <input type="checkbox"/> Other: _____
	\$	<b>TOTAL COST of the Conference/Travel</b>

<b>REIMBURSEMENT TO REQUESTER</b>	<b>\$</b> _____
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\_\_\_\_\_  
(Signature of Requester Verifying Actual Expenses)      (Date)

\_\_\_\_\_  
(Authorized Signature - Actual Expenses Approval)      (Date)

<u>ASN #</u>	<u>Amount</u>

## **MCISD REIMBURSEMENT PROCEDURES**

Guidelines for work-related mileage and conference/travel reimbursements

### **Meals:**

A detailed receipt is required in order to be reimbursed for any meal.

As a general guideline, a daily allowance for meals is \$40.00. If your lunch is provided by the conference or training, then \$10.00 should be deducted from the daily allowance. Tips should not exceed 20%. Requester may be responsible for any charges over these guidelines or would need to provide an explanation and obtain proper approval. Any receipts containing alcoholic beverages will not be reimbursed.

### **Mileage:**

All travel must be by a direct travel route. If you are traveling outside of the district, a route planner (MapQuest, Google Map ... ) should be attached to the reimbursement form. Reimbursement will be at the prevailing IRS rate per mile. When an employee travels from home, mileage will be paid from the employee's home or from MCISD, whichever is less.

If unusual circumstances exist, they must be properly documented and approved on the reimbursement form.

### **Registration Fees:**

Enrollment or registration fees for approved conferences/workshops are to be prepaid by the district whenever possible. Purchase Orders must be completed in advance of the due date for registration.

### **Lodging:**

Lodging expenses are to be prepaid by the district whenever possible (direct billing or credit card). Expenses are limited to reasonable single-room cost at the host hotel or other hotels located in the general conference area. Any miscellaneous charges for non-related approved conference expenses will be the responsibility of the individual. A detailed lodging receipt must be included with the conference request form.

### **Parking, Tolls & Miscellaneous Expenses Items:**

All receipts must be submitted with the reimbursement request form. Valet parking will generally not be permitted. Necessary taxicab or other public transportation fares will be reimbursed with proper documentation.