

Today's Date: _____

Professional Leave/Travel Request Form

Professional Leave/Travel Process

- The requestor sends the completed Professional Leave/Travel Request Form **two (2) weeks in advance** of the travel date to the Office of Academic Services for approval
- After District review and approval, the request will be submitted to the Business Office for check processing
- All checks will be cut according to the Business Office's weekly schedule and then returned to the site for distribution
- **Receipts or unspent money must be returned to the Business Office for expenses other than per diem** (i.e. baggage, parking, etc.)

Please list only one person per form

It is requested that _____ be authorized to take professional leave to attend _____, a professional development opportunity.

Dates: _____

City: _____ State: _____ Zip: _____ Phone # of Person Traveling: _____

A Per Diem of \$ _____ is requested (*Meals Only- Daily per diem is \$50.00 for 3 meals & \$25.00 for 2 meals - No receipts needed for food*)

Other Expenses (i.e. luggage, shuttle, parking) \$ _____ (*Receipts Required*)

PO#: _____ Sub Needed: _____ Funding Source: _____

Approved/Denied: _____ Approved/Denied: _____

(Circle One) Principal/Supervisor Date _____ (Circle One) Central Administration Date _____

Hotel Reservation

(Please request tax exempt status in Colorado)

Hotel: _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Reservation Confirmation #: _____ Continental Breakfast? _____

Check-in Date: _____ Check-out Date: _____

Other Expenses: _____ (*Receipts Required*)

PO#: _____ Method Of Payment: _____ AMOUNT TO BE PAID: \$ _____

Conference Registration/Other

Organization: _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Please attach Registration Form – To avoid duplication, please indicate if you have already registered by:

Fax _____ Phone _____ Internet _____

PO#: _____ Method of Payment: _____ AMOUNT TO BE PAID: \$ _____

Transportation Information

(This form does not reserve a vehicle)

I have submitted a request to the Transportation Dept. _____

I need a gas card _____

I will not need transportation _____

I had to reserve an external rental car _____

Company: _____ PO#: _____ Method of Payment: _____

AMOUNT TO BE PAID: \$ _____

If using Airfare, complete the following

Airline: _____

PO#: _____ Ticket Amount: \$ _____ Method of Payment: _____

AMOUNT TO BE PAID: \$ _____

Notes:

Expense Summary

Per Diem \$ _____	Hotel \$ _____
Conference \$ _____	Transportation \$ _____
Flight \$ _____	Other \$ _____
Total \$ _____	