

**Travel Request Form**Name: Greg Duty    ☐ Board Member    ☒ Employee    ☐ Other, as specified \_\_\_\_\_

School/Work Site: Southgate School District    Conference/Workshop: Superintendents' Retreat

Date(s): 6/14-6/16    Departure Time: 4:00PM    Return Time: 4:00PM

**Rationale for Attendance:** Superintendents within the NKCES will participate in the annual summer retreat where the vision for the regional capacity is established through collaboration.Expenses paid by: ☐ Individual    ☐ Board    ☐ Special Education    ☐ KEA    ☒ Co-Op  
☐ School Council ☒ Other, as specified – Lodging and some meals are covered by NKCES.Substitute Needed?    ☒ No    ☐ Yes    Number of Days \_\_\_\_\_Registration Reimbursement Requested    ☒ No    ☐ Yes    Amount: \_\_\_\_\_**Estimated Mileage**    Total Miles: 204 miles    Total Cost \$83.64  
Mileage will be reimbursed at the rate approved by the Board.**Lodging Reimbursement Requested**    ☒ No    ☐ Yes  
Amount per night \_\_\_\_\_ ☐ Regular Rate    ☐ Business Rate    ☐ Conference Rate**The District will not reimburse for lodging expenses for guests/traveling companions.****Meals Reimbursement Requested:**    ☐ No    ☒ Yes    Total Daily Meal Expense Limit \$ \_\_\_\_\_  
Meal limits do not include gratuities. The District will not reimburse employees for gratuities exceeding 15% of the meal charge.**Receipts required for all expenditures.**

After Conference/Workshop, turn in expenses for Registration, Lodging, Meals, and other related charges on a Standard Invoice and attach receipts, as appropriate.

\_\_\_\_\_  
*Signature of Applicant*\_\_\_\_\_  
*Date*\_\_\_\_\_  
*Signature of Superintendent/Designee*\_\_\_\_\_  
*Date***RELATED PROCEDURE:**

04.31 AP.2 (District procurement cards)

Review/Revised:7/11/13