Travel Request Form Idaho Falls School District 91

(One sheet per traveler)

Traveler:_____ School/Department: _____

Address: _____ Dates of travel: _____to _____ = _____Total # of days

Purpose for travel: _____

Destination (city & state): _____

On Pcard_ _ **Check Request**

Air Fare, Registrations, Conference Fees, and Lodging:

Pcards should be used whenever possible.

If not charged to a pcard, attach original receipts for reimbursement

Air Fare		$_____	$_____
Registration/conference Fees	Check to: _____	$_____	$_____
Lodging	Check to: _____	$_____	$_____

Transportation: Travelers shall use the most cost-effective and efficient mode of travel by renting a vehicle or, if available scheduling a school district owned vehicle. **Under no circumstances** should a pcard be used for fuel in a private vehicle.

Pcards should be used whenever possible.

If not charged to a pcard, attach original receipts for reimbursement

Vehicle Rental: You may use Hertz or Enterprise for your rental. Please keep cost efficiency in mind when choosing the company that best suits your needs.

Hertz discount code (CDP): **2192872** or

Enterprise Rent-A-Car discount code: **47ID098** pin $_____ $_____

Private Vehicle with mileage computed to and from conference location according to MapQuest, Yahoo, or Google Maps and paid at

# of miles _____x .625 cents per mile $_____

Other Expenses: Fuel for rental or district vehicles, parking, and ground transportation for district business only. Does not include personal travel to restaurants, shopping, sightseeing, etc.

Pcards should be used whenever possible.

If not charged to a pcard, attach original receipts for reimbursement $_____ $_____

Per Diem: Refer to travel on Employee Website → Business Dept. → Travel and attach copy of per diem rate

Under no circumstances should a pcard be used to purchase personal meals or personal transportation while on travel

No Per Diem is given for one day travel: if reimbursement is requested, it must be sent to payroll as it is taxable

Overnight travel - attach copy of per diem rate

Per Diem $_____	x # of days	= $_____	
75% for first and last day $	x 2	= $_____	
Less total meals provided (per allowance)		- $_____	$_____

Allowance per meal ($13 breakfast, $15 lunch, and $26 dinner)

CODE: _____ Total Expenses $_____

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TOTAL AMOUNTS: $_____ $_____ $_____

Other Check **On Pcard** **Traveler Request**

Signature of Supervisor/Principal:_____ Date:_____ Approved ☐ Denied ☐

Signature Approving Code Expense:_____ Date:_____ Approved ☐ Denied ☐