

WALL TOWNSHIP PUBLIC SCHOOLS TRAVEL PROCEDURES FOR OVERNIGHT PROFESSIONAL DEVELOPMENT

Travel payments will be paid only upon compliance with the Board's policy provisions and approval requirements. The Board will not ratify or approve payments or reimbursements for travel after completion of the travel event.

1. Employee submits request for a Professional Day through AESOP along with a Travel Request Form and documentation that includes: date, time and place of meeting; name and address of sponsoring organization; purpose of meeting and anticipated value to the school district.

Each employee attending an event must complete his/her own form. The only exception is for events for which the Board is only paying for the registration fee. In this instance, multiple names may be entered on the form or a list attached with names, titles, and building locations. An agenda or brochure for the event, showing dates and locations, must be attached.

An employee can only be reimbursed for Meals & Incidental Expenses (M&IE) if an overnight stay is involved. If an overnight stay is not included, write N/A for "GSA Maximum Rates for Lodging & M&IE (Meals & Incidental Expenses)". If an overnight stay is included, type in the maximum per diem rate for lodging and M&IE as follows:

- a. Go to www.gsa.gov to determine the maximum per diem rate to be reimbursed for lodging and M&IE.
 - b. If the exact city in which your hotel is located is not listed, the maximum per diem rate will be the standard CONUS rate found on www.gsa.gov.
 - c. The maximum amount that can be reimbursed for the first and last day is 75% of the per diem rate.
 - d. Incidental expenses are defined as tips and transportation between lodging/training site and where meals are taken if suitable meals cannot be obtained at the lodging/training site, or any other transportation other than to and from the travel event.
 - e. If the GSA M&IE is used for reimbursement, receipts are not required.
 - f. Mileage reimbursement is for excess mileage to attend the event. If mileage is being calculated from employee residence to event, the employee's round trip commuter mileage (home to work) is subtracted from the round trip mileage from home to event.
 - g. The Commissioner is authorized to grant waivers for overnight **travel** for school Board members and school district employees to attend in-State conference in accordance with N.J.A.C. 6A:23A-7.11(c). If a waiver is granted by the Commissioner, it shall permit reimbursement for **travel** expenses for only those individuals whose home to the convention commute exceeds 50 miles.
2. Building Principal/Supervisor approves/declines through AESOP (requests are required 45 days prior to travel event).
 3. Office of Curriculum & Instruction (or Grant Administrator, if grant funded) enters purchase requisition for travel event.
 4. After Superintendent's approval, the travel request is placed on the Board of Education agenda for approval at the next scheduled meeting.
 5. Once "Travel" is completed, Building Principal/Supervisor submits the following to the Business Office for reimbursement within 45 days of travel event:
 - Overnight Travel Request Form
 - Report Upon Completion of Travel
 - Completed Travel Expenditure Form along with receipts or cancelled check
 - Signed purchase Order (yellow copy), unless funded by a grant
 - A valid New Jersey Insurance Identification Card
 - Driving mileage map i.e. Google Map

Note: All travel reimbursements must be paid out of budget account in which they were approved.

WALL TOWNSHIP PUBLIC SCHOOLS PROFESSIONAL DEVELOPMENT REQUEST FORM

Employee Name: _____ Building: _____

Position: _____ Conference Title: _____

Date(s) of Conference: _____ In District/Out of District: _____

COSTS TO THE DISTRICT	
Reason	Amount
<input type="checkbox"/> Registration	\$
<input type="checkbox"/> Travel _____ mi. @\$.31	\$
<input type="checkbox"/> Tolls	\$
<input type="checkbox"/> Parking	\$
<input type="checkbox"/> Other	\$
Total Cost	\$

RATIONALE
<input type="checkbox"/> Certification required for employment
<input type="checkbox"/> Continuing education requirement
<input type="checkbox"/> Federal requirement
<input type="checkbox"/> State requirement
<input type="checkbox"/> Related to district operations or program

Justification to attend:

Purpose, key issues, relevance:

Office of Curriculum & Instruction:

Account #: _____

Signature: _____

Board of Education Approval Date: _____

WALL TOWNSHIP PUBLIC SCHOOLS

TRAVEL REQUEST FORM FOR OVERNIGHT PROFESSIONAL DEVELOPMENT

Name of Applicant: _____ Date: _____

Title: _____ School/Location: _____

Name of Program/Seminar: _____

Justification to attend: _____

Destination: _____

Dates of Trip: _____

Maximum Rates for Lodging: \$_____/per day. (Federal Per Diem Rate for Location)

Maximum Rate for Meals & Incidental Expenses: (M&IE) \$_____/per day (Fed.Per Diem Rate)
(If you are not staying overnight, you cannot be reimbursed for M&IE)

Estimated Cost:

Amount

Program/Seminar \$ _____

Transportation to/from event

_____ # of miles @ .31¢ per mile \$ _____

and/or other: _____ \$ _____

Max. Lodging (or actual costs per policy) exc. taxes

_____ # of days @ \$ _____ daily rate \$ _____

Meals & Incidental Expenses *

_____ # of full days @ _____ daily rate \$ _____

First & last day at .75 of M&IE, (2 x 0.75 x \$ _____) \$ _____

Tolls \$ _____

Parking \$ _____

Misc. Expenses (_____) \$ _____

Total Estimated Cost

\$ _____

Explanation if necessary: _____

Applicant Signature: _____ Date: _____

Principal/Supervisor Approval: _____ Date: _____

Superintendent Approval: _____ Date: _____

BOE Approved on: _____ Account Number: _____

Maximum rates for lodging and M&IE can be found at www.qsa.gov. Click on "Per Diem Rates" and then use the map to select your city. M&IE for the first and last day are reimbursed at 75% of the maximum.

The maximum reimbursement for locations not on the chart is the standard CONUS rate.

*The Commissioner is authorized to grant waivers for overnight **travel** for school Board members and school district employees to attend in-State conferences in accordance with N.J.A.C. 6A:23A-7.11(c). If a waiver is granted by the Commissioner, it shall permit reimbursement for **travel** expenses for only those individuals whose home to the convention commute exceeds fifty miles.*

WALL TOWNSHIP PUBLIC SCHOOLS
TRAVEL EXPENDITURE REIMBURSEMENT FOR OVERNIGHT PROFESSIONAL DEVELOPMENT

Name: _____

Title: _____

Program/Seminar/Etc.: _____

Date(s) of Event: _____

Destination: _____

Board Approval Date: _____

	GSA Maximum Amount for Lodging and M&IE:		Lodging: \$ /day		M&I.E. \$ /day		Misc: \$ /day	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	TOTAL
Date								
Registration (receipt)								
Travel - Air (receipt)								
Travel - Ground (1)								
Hotel								
Parking (receipt)								
Misc. (2) (receipt)								
# Miles Traveled (3),(4)	mi.	mi.	mi.	mi.	mi.	mi.	mi.	
Mileage @ .31								
Tolls (document)								
Breakfast (receipt)								
Lunch (receipt)								
Dinner (receipt)								
M&I.E. (5) (no receipts)								
TOTAL								

- (1) Travel-Ground is cost to and from event on first and last day, (i.e., bus, train, airport shuttle, taxi to hotel). Include receipt.
- (2) Hotel tax is to be recorded here. Employee is to check with hotel to see if a stay can be tax exempt and make arrangements accordingly.
- (3) Copy of New Jersey Insurance Identification Card showing coverage in effect must be attached.
- (4) If traveling from and to your home, you must deduct the mileage from your home to work times two (daily commute) from the mileage.
- (5) Use M&I.E. or Breakfast, Lunch, Dinner, do not use both. You cannot be reimbursed for more than GSA maximum.

I certify that all of the above expenses are correct and adhere to the Board of Education's travel policies and procedures I also certify that all expenses were incurred by me on behalf of business of the Board of Education.

Employee's Signature: _____ Date: _____

Principal/Supervisor Approval: _____ Date: _____

Director of C & I Approval: _____ Date: _____

WALL TOWNSHIP PUBLIC SCHOOLS

REPORT UPON COMPLETION OF TRAVEL

In accordance with Board policies #6471 and #3240 – Expenses and Reimbursement, please provide, within ten (10) days of completion of travel/event, a brief report which includes a description of the primary purpose for the travel, a summary of the goals and key issues that were addressed at the event, and their relevance to improving the instruction or the operation of the school district.

Name: _____

School/Dept.: _____ Grade/Subject: _____

Date of Event: _____

Full Name of Event: _____

Location of Event: _____

Board Approval Date: _____

Purpose/Key Issues: _____

(add additional sheets as necessary)

 Signature of Principal or Immediate Supervisor Date

 Director of C & I Signature Date