

WORKSHOP/TRAVEL REIMBURSEMENT

EMPLOYEE NAME: _____

SCHOOL: _____

WORKSHOP: _____ WORKSHOP DATE: _____

TODAY'S DATE: _____ AMOUNT REQUESTED: _____

DOCUMENTS REQUIRED

	<u>HAVE</u>	<u>MISSING</u>	<u>NOTES:</u>
1. Professional Leave Request Form	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Registration information and form	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Map Quest directions from school	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Travel Certification	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Estimate of other charges, parking, tolls	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. GSA Schedule-lodging/meals/incidentals	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Synopsis of workshop, signed by Staff Member AND Supervisor/Administrator	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. Original receipts for all reimbursement charges	<input type="checkbox"/>	<input type="checkbox"/>	_____

Other Miscellaneous Notes:

Reimbursement will be withheld until ALL proper documents are submitted to the Payroll Department.