



TEACHER TRAVELING WITH STUDENTS

Career and Technology Education
TRAVEL FORM

Teacher _____ Application Date _____

Student Organization _____

Destination (city) _____

Name of Conference _____

Departure Date _____ Departure Time _____ am pm

Return Date _____ Return Time _____ am pm

Teacher Travel Expenses

Transportation: (charter, airline tickets, etc.)						
\$ _____	X	_____				\$ _____
Fare amount		# of teachers				TOTAL
<hr/>						
Meals:						
\$46.00 Daily Total (per teacher/advisor)	X	_____	X	_____		\$ _____
		# of days		# of teachers		TOTAL
Note: Departure/Arrival before 1pm= .5 day, Departure/Arrival after 1pm = 1 day						
Hotel:						
\$ _____	+	_____	X	_____	X	_____
Daily rate		LOCAL TAX		# of days		# of rooms
						TOTAL
<hr/>						
Registration Per Person:						
\$ _____			X	_____		\$ _____
Registration fee				# of teachers		TOTAL

Student Travel Expenses

Transportation: (charter, airline tickets, etc.)						
\$ _____	X	_____				\$ _____
Fare amount		# of students				TOTAL
<hr/>						
Hotel:						
\$ _____	+	_____	X	_____	X	_____
Daily rate		LOCAL TAX		# of days		# of rooms
						TOTAL
<hr/>						
Registration Per Person:						
\$ _____			X	_____		\$ _____
Registration fee				per person		TOTAL
<hr/>						
Meals Per Person						
\$ _____	X	_____	X	_____		\$ _____
Daily rate		# of days		# of students		TOTAL

Complete the following information for advance travel.

Checks or Purchase Orders Needed - In Advance (hotel, food, transportation, registration fees)

Vendor	Description	Amount	Deadline for Pick-up
Name Address Phone ()			
Name Address Phone ()			
Name Address Phone ()			
Name Address Phone ()			

For Reimbursement Paid Upon Return

FILL IN ON THE FRONT PAGE

Vendor	Description (include mileage)	Amount	Estimate (prior to trip)	ACTUAL (upon return)
Name Address Phone ()				
Name Address Phone ()				

Please keep a copy for your records.

Submit Form