



**GANADO INDEPENDENT SCHOOL DISTRICT  
Employee/Student Travel  
APPROVAL FORM**

This form is to be used to request approval for travel on official school business. Employees must receive approval for travel expenses *PRIOR* to incurring any costs. An estimate of the total cost for the trip should be made. Upon completion of the trip, the employee will need to turn in receipts and any unused funds connected with the travel. Receipts must not contain alcohol purchases. Checks for lodging and meals will be issued by the date requested below. Please allow two weeks for approval and processing.

<b>A Traveler Information</b>			
Name: _____		Campus/Dept: _____	
		Substitute Needed:    Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>B Trip Information</b>			
Destination: _____		Purpose of Travel: _____	
Number of Persons Traveling	Adults: _____	Students: _____	
Travel Dates/Times	Leave Date: _____	Time: _____	
	Return Date: _____	Time: _____	
<b>C Estimated Cost</b>			
Lodging Information	Vendor: _____	Cost per Room: _____	
	Number of Rooms Needed	Adult Rooms: _____	Student Rooms: _____
Total Lodging:	\$ _____	Student Meals Prices: \$6.00 Breakfast	
Parking:	\$ _____	\$10.00 Lunch	
		\$12.00 Dinner	
Adult Meals:	\$ _____	Adult Meal Prices: Please contact the business office for current rates.	
Student Meals:	\$ _____		
Total Cost:	\$ _____	Date checks for lodging and/or meals needed: _____	
<b>D Account Codes</b>			
<i>To Be Completed by Budget Manager (if multiple accounts, please add an additional page)</i>			
Adult Travel Account:	_____	Amount:	\$ _____
Student Travel Account:	_____	Amount:	\$ _____
<b>E Pre-Travel Approval Signatures</b>			
Employee	_____		
Principal/Director	_____	Travel Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>
		Funds Available	Yes <input type="checkbox"/> No <input type="checkbox"/>
Requisition Number	_____	PO Number:	_____