

WAYLAND PUBLIC SCHOOLS CONFERENCE/VISIT REQUEST AND REIMBURSEMENT FORM

PART I (Please print/type):

Name: _____ Date Submitted: _____

School: _____

Home Address: _____ City/Town: _____ Zip Code: _____

Conference/Visit: _____

Vendor Name (required if any payment is being made directly to outside vendor): _____

Date(s) of Conference/Visit: _____ Location: _____

Expenses:

	<u>Estimated:</u>	<u>Payment to:</u>		<u>Actual Submitted:</u>
		<u>Outside Vendor</u>	<u>Staff Member</u>	
Registration Fee*	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Meals**	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Lodging**	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Transportation (instructions on reverse side)***	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Tolls and Parking	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other Expenses	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Subtotal	\$ _____			\$ _____
Substitute	_____			_____
TOTAL	\$ _____			\$ _____

Purchase Order Number(s):

1) _____

2) _____

* Copy of registration form and proof of payment must be included.
 ** General Laws, Chapter 44, Section 58, restrictions apply; no alcoholic beverages. Maximum per diem reimbursement rate of \$50 for meals; itemized receipts required.
 *** Current IRS standard mileage rates to be used to calculate reimbursement of auto expenses.

PART II:

Expenses may be deducted from several accounts. Please list all applicable accounts:

Account Name: _____	Account #: _____	Available Balance: \$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Approved: _____
Principal/Administrator Date

PART III:

Approved: _____
Assistant Superintendent Date

PART IV:

I have reviewed the attached documentation and approve reimbursement of actual expenses as listed above.

Principal/Administrator Date

**FORMS AND ORIGINAL RECEIPTS MUST BE RETURNED WITHIN THIRTY (30) DAYS
 OF THE EVENT TO THE WAYLAND PUBLIC SCHOOLS, ACCOUNTS PAYABLE**
 (see reverse side for instructions for approval and reimbursement)

Instructions for Completion of Conference/Visit Request and Reimbursement Form

REQUEST FOR APPROVAL:

Approval must be obtained PRIOR to attendance at any conference or visit using the form on the reverse side. Please allow sufficient time for the approval process to be completed.

1. Applicant to complete Part I. Include all estimated expenses and submit to Principal/Administrator for approval.
 - **Transportation:**

For conferences or visits that take place on days when school is in session, total reimbursable mileage is calculated as total mileage to and from conference/visit location less total mileage to and from school location. A printout with driving directions showing total mileage (e.g., MapQuest, Google Maps, Bing Maps) may be provided in lieu of listing start and end mileage below.

Auto (IRS mileage reimbursement rate; www.irs.gov)

Destination: _____

Start Mileage: _____ End Mileage: _____

____cents/mile x _____ miles = TOTAL MILEAGE EXPENSE \$ _____

Tolls and Parking: Submit original receipts.

Air and Train: Submit original receipts and/or original tickets.
 - **Meals:**

Average per diem \$35.00; maximum per diem \$50.00.

Alcoholic beverages are not reimbursable. *General Laws, Chapter 44, Section 58, restrictions apply.*

Please submit all itemized original receipts that **do not** include costs for alcoholic beverages.
 - **Lodging:**

Every effort should be made to secure the most cost-effective accommodations appropriate to the setting and purpose of the trip.
 - **Substitute:**

Substitute teachers are paid a per-diem rate of \$75.
2. Principal/Administrator to complete Part II for identification of funding sources and approval. Form to then be forwarded to Assistant Superintendent for approval.
3. Upon approval by the Assistant Superintendent in Part III, form will be returned to building designee, department head, or applicant. Building designee or department head will notify applicant of approval.
4. Purchase order requisition(s) will be generated based on estimated expenses and the approved conference request form should be uploaded as an attachment to each purchase order requisition. (If the conference registration fee is to be paid directly to the conference organizer, multiple purchase order requisitions will be required, e.g., one to conference organizer for registration and one to conference attendee for reimbursement of other expenses.)

REQUEST FOR REIMBURSEMENT:

After the conference or visit, submit one original and one copy of the following documents to Accounts Payable for processing of reimbursement. Reimbursement cannot exceed pre-approved amounts for the accounts originally identified.

- ✓ The Purchase Order "Purchaser/Receiving Copy" (pink copy) signed/initialed by individual authorized to approve payment.
- ✓ Copy of Conference/Visit Request and Reimbursement Form with actual expenses and purchase order number(s) listed and signed by Principal/Administrator in Part IV.
- ✓ Printout detailing the dates and cost of the conference.
- ✓ Proof of conference attendance (e.g., PDP certificate, certificate of attendance).
- ✓ Original itemized receipts for all expenses, e.g., tolls, parking, meals, train fares, taxis, hotel charges. Sales tax cannot be reimbursed; meals tax and hotel tax will be reimbursed; charges for liquor and tobacco cannot be reimbursed. A printout of driving directions (e.g., MapQuest, Google Maps, Bing Maps) required for mileage reimbursement. For cash payments, a receipt from the vendor is acceptable. If paid by check, a copy of the canceled check is required. If charged to a debit or credit card, a copy of the statement showing your name and the charge is required.