TRAVEL REQUEST FORM
San Juan Island School District

Employee Name: _____ Title of Conference/Workshop: _____

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

Rationale for Attending: _____

Each staff member traveling must submit this form. Remember to complete an **EXPENSE CLAIM FORM upon your return** for expenses accrued during travel (transportation, meals, and any other costs). Receipts must be attached to the Expense Claim form for all claims except approved meals and mileage. <mark>ATTACH GOOGLE MAP AND CONF. AGENDA</mark>

AUTHORIZATION OF EXPENDITURES

Registration fees for conference/workshop	(Complete registration through your building office)	
Substitute	Classified hourly rate (depending on position): _____ $28.25_ x # of hours _____ Certificated Full Day (depending on the substitute): _____ roughly $252 to $280 x # of days _____	
Lodging Costs <mark>SUBMIT ROOM RECEIPT UPON RETURN</mark>	Once travel request form has been approved, enter a requisition so that the hotel can be booked.	
Transportation Costs	Ferry Tickets - Use seasonal commuter rates for *Car/Driver* and *Passenger* tickets Spring 2025: C&D $44.57 Passenger $10.74 Bus $238.65 *See page two to arrange for vehicles, ferry tickets and reservations*	
Mileage Attach a Google Map with total miles round trip	Vehicles: 70 cents/mile or Bus: $2.42/mile Total miles _____ x _____/mile Bus driver cost @ $36.71 per hour (regular rate): _____	
Meals Number of meals approved According to travel policy (No meals for day trips)	No. of Breakfasts _____ @ $13 = _____ No. of Lunches _____ @ $14 = _____ No. of Dinners _____ @ $23 = _____	
Other Costs		
	Total Cost	

Department/Program _____   **Account code (Required)** _____

Employee signature _____ **Date** _____

Administrator approval _____ **Date** _____

Superintendent approval _____ **Date** _____

Form Last Updated 3/12/2025

SAN JUAN ISLAND SCHOOL DISTRICT #149
<u>Travel Request Transportation Form</u>
Submit this form with Travel Request form (as page 2)

Date(s) of trip:_____   Request by: _____

Check one: Bus _____   VAN #1 _____   VAN #2 _____   Personal Vehicle _____

(Note: District SUV's hold 8 passengers plus a driver. No students allowed in personal vehicles.)

Group / Activity: _____ Destination: _____

Supervisor: _____ Total No. Passengers: _____

<u>ON ISLAND TRIP</u>

   Trip will depart school at _____a.m. / p.m.   Trip will return to school at _____a.m. / p.m.

<u>FERRY TRIP</u>

   Trip will *depart* Friday Harbor on the ferry at _____ a.m. /p.m. on (date) _____

   Trip will *return* from Anacortes on the ferry at _____ a.m. /p.m. on (date) _____

   Trip will *return* from (other island)_____ on the ferry at _____ a.m. /p.m. on (date) _____

Ferry reservations (y/n) ____   Car & Driver ferry ticket (y/n) _____   Passenger ferry tickets (y/n) _____

Flat rate school district letter (two or more passengers on a district trip) (y/n) _____

ACCOUNT CODE: _____

Day of trip:		For office use only:
<u>ODOMETER READING</u> <u>TIME</u>		TRIP COST

 Day of trip:

<u>ODOMETER READING</u>   <u>TIME</u>

_____ Return   _____ Return

_____ Depart   _____ Depart

_____ **Total miles**   _____**Total Hours**

Bus Driver _____ Bus number: _____

Wave2Go Card Number: _____

Reference numbers: District Office (360) 378-4133

 Kraig Hansen, TS Cell (360) 622-6157, Work (360) 370-7907

Brock Hauck, AD Cell (909) 322-0022, Work (360) 370-7115

FH Ferry terminal (360) 378-8665 Ana Ferry terminal (206) 264-3560

State Patrol (206) 949-3661, (360) 757-1175

Anacortes Police (360) 293-1684   **Signature of Vehicle Driver**: _____   **Date:** _____

For office use only:

TRIP COST

Van: _____ miles @ $0.70 per miles _____

Bus: _____ miles @ $2.42 per mile _____

 Regular hrs _____ @ 36.71 per hr _____

Overnight: _____ @ 20.27 per hr _____

Overtime: _____@ 55.06 per hr _____

Ferry Fees = _____

Additional costs_____ Bus Driver Meals _____

Total = _____

Notes: