

# SCHOOL DISTRICT OF WASHINGTON

## OUT OF STATE TRAVEL REQUEST FORM

This form must be submitted and approved by the Superintendent *prior* to travel.

Name:  Date:

Department/Building:

Destination:

Departure Date:  Return Date:

Conference Fee:  Hotel Fee:

Rationale for Attending the Conference:

All out of state travel must be approved by the Superintendent of Schools prior to travel. Once the conference has been approved, all appropriate Purchase Orders must be entered and approved prior to reserving the conference. **All travel, mileage, rental cars, and meals will be the responsibility of the employee, not the District.** If out of state travel is necessary for a National competition, payment of necessary and reasonable expenses may be approved. Other exceptions will be reviewed on a per case basis.

Account Code:

\* \* \* \* \*

I certify that the travel is necessary and directly related to the conduct of the business of the School District of Washington.

\_\_\_\_\_  
Employee Signature

Date:

\_\_\_\_\_  
Principal/Supervisor Signature

Date:

\* \* \* \* \*

Approved

Disapproved

Comments:

\_\_\_\_\_  
Superintendent Signature

Date: