

STAUNTON COMMUNITY UNIT SCHOOL DISTRICT NO. 6

801 North Deneen Street
Staunton, IL 62088

TRAVEL AUTHORIZATION and PASSENGER LIST

- ✓ It is the responsibility of the teacher/sponsor to contact the bus garage to make transportation arrangements once the trip has been approved. *** Fill out passenger info on the back of this form.***
- ✓ This form must be submitted to the building principal for approval. It will then be submitted to the superintendent for final approval.
- ✓ If school bus or van transportation is used, please list all people transported on the reverse side with emergency contact information.
- ✓ In order to receive reimbursement, an expense reimbursement form with all receipts attached must be submitted to the superintendent's office.

Date: _____ Bus Request: Yes No Van Request: Yes No

TRIP INFORMATION

Teacher/Sponsor Name: _____ Date of Trip: _____

Destination: _____
City State

Departure Time: _____ a.m./p.m. Return Time: _____ a.m./p.m.

Reason for Trip: _____

FEE/PAYMENT INFORMATION

Registration fee: I have prepaid Request to send No fee required
If fee is to be mailed: Amount of Check: _____ Registration Due Date: _____

Mail Registration to: _____

Address: _____
Street City State Zip

Explanation of Educational and/or Professional Development of Trip: _____

ESTIMATED EXPENSES

Hotel Expense: \$ _____ Meal Expense: \$ _____

Other Expenses: _____

Driving own Vehicle: Yes No Estimated # of miles _____ @ .555 per mile(rate per contract)

APPROVAL

Approved absence **with** pay Approved absence **without** pay Not Approved

Principal's Signature

Approved absence **with** pay Approved absence **without** pay Not Approved

Superintendent's Signature

