

TRAVEL / EXPENSE AUTHORIZATION REQUEST

1. Prepare and submit approved travel/expense authorization request with approved paper requisition(s) or PIF Applications to the Office of the School Business Administrator.
2. Attach itinerary, meals breakdown, registration, etc. regarding the purpose of the trip to the travel/expense authorization request form.
3. Prepare and submit an Out of State Travel Form, if traveling outside of the State of New Jersey.

NAME:					DEPT./SCHOOL:			
TITLE:					EMPLOYEE ID#			
INCLUSIVE DATES OF TRIP:								
DESTINATION: (city, state)								
TITLE OF EVENT:								
Account #	Fund	Sub Fund	Program	Function	Object	Location	Reference	Regional

EXPENSES: OBTAIN RATE FROM WWW.GSA.GOV AND ATTACH COPIES

							AMOUNT
Meals:	\$	per day (breakdown attached)					\$
Transportation:	\$	(air)	\$	(train)	\$	Processing fees:	\$
Private Auto:		miles @ \$.31 per mile					\$
Private Auto:		miles @ \$.54 per mile (new rate as of 01/01/16)					\$
Lodging:		# days @	\$	per day	\$	Taxes/Fees	\$
Registration:	\$						\$
Baggage Fees:	\$	(Note: one bag only each way)					\$
Taxi/Shuttle:							\$
Other: (explain)							\$
TOTAL:							\$
Professional Improvement Fund:							\$
Out of Pocket Expenses:							\$
GRAND TOTAL:							\$
Union Affiliation: (circle one) NTU NTA CASA Local 32 Unaffiliated Local 617 OTHER:							

For Use by SBA's Office Only	
Copy of Car Ins.	Taking Public Trans:
Being Driven by Another NPS Employee:	

Vendor Name	Amount of Requisition	Requisition Number
	\$	
	\$	
	\$	
TOTAL: (Should match the grand total above.)	\$ -	

Employee Signature:		Date:
Approved:		Date:
Principal/Director	Signature	
Approved:		Date:
Assistant Superintendent/Executive Director	Signature	
Approved: State District Superintendent		Date:
	Signature	