



# OUT OF TOWN TRAVEL PROCESS AUTHORIZATION AND REIMBURSEMENT SHELBY COUNTY SCHOOLS





# Travel Authorization and Expense Process

1. Introduction
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# Travel Authorization (See Next Slide for Detailed Steps)

Revised: 01 Jul 2016

**SHELBY COUNTY SCHOOLS  
TRAVEL AUTHORIZATION AND EXPENSE REPORT  
(SEE NEXT PAGE FOR REGULATIONS)**

**This form must be approved by the Authorized Official(s) and a Trip I.D. # assigned by FINANCE prior to making any travel arrangements. [Allow 30 Calendar Days for Finance to Process Travel Request - \*\*\*NOTE: If using Federal Funds allow 60 days\*\*\*]**

**Travel Agency: Wright Travel (901) 767-2080**

**\*\* MUST BE COMPLETED \*\***

EMPID # \_\_\_\_\_ N \_\_\_\_\_

Fund \_\_\_\_\_ P \_\_\_\_\_

Function \_\_\_\_\_

Object \_\_\_\_\_

Department \_\_\_\_\_

Location \_\_\_\_\_

Project \_\_\_\_\_

Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**Email form to:**

**I. TRANSPORTATION**  
Travel Agency: Wright Travel - (901) 767-2080  
(A) Airline (name) \_\_\_\_\_  
(B) Parking (receipts required) \_\_\_\_\_  
Taxi, Shuttle, etc. (see regulations) \_\_\_\_\_  
(C)  Board Car  Personal Car \_\_\_\_\_ MILES @ .54c

**II. FOOD**  
(A) Breakfast(s) # \_\_\_\_\_ @ \$10.00 Maximum Each  
(B) Lunch(s) # \_\_\_\_\_ @ \$10.00 Maximum Each  
(C) Dinner(s) # \_\_\_\_\_ @ \$25.00 Maximum Each

**III. LODGING** Hotel (name) \_\_\_\_\_  
Exception Justification: \_\_\_\_\_

**IV. MISCELLANEOUS**  
Business Phone Calls, Faxes \_\_\_\_\_  
Registration Fees (Itinerary must be attached) \_\_\_\_\_  
Other: (Explain) \_\_\_\_\_

**V. REIMBURSEMENT BY AN OUTSIDE AGENCY**  
Agency \_\_\_\_\_ Amount \$ \_\_\_\_\_

Trip I. D. # \_\_\_\_\_

Social Security # \_\_\_\_\_

Dept./Div./School \_\_\_\_\_

Destination \_\_\_\_\_

Purpose for Trip \_\_\_\_\_

Departure Date \_\_\_\_\_ Time \_\_\_\_\_ Number of Reimbursable Days \_\_\_\_\_

Return Date \_\_\_\_\_ Time \_\_\_\_\_

ESTIMATED EXPENSES	(A)	(B)	(C)	(D)
<b>TOTAL PER COLUMN</b>	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL COST OF TRIP</b>	(B+C+D) → \$ _____			
<b>REFUND DUE TO YOU</b> \$ _____				
<b>REFUND DUE TO SCHOOL</b> \$ _____				

**\*\*\* FOR OFFICIAL USE ONLY \*\*\***

EXPENSE CK # \_\_\_\_\_

Trip Canceled \_\_\_\_\_  
Check Returned \_\_\_\_\_

I certify that the foregoing report is correct and is in compliance with SCS travel regulations.

Travel Authorization	Expense Report	Travel Authorization Approval	
Traveler's Signature _____	Traveler's Signature _____	Authorized Official's Signature / Date _____	Aut
Date _____	Date _____	Principal's Signature / Date _____	Prn

Traveler's Home Address (include Zip Code) \_\_\_\_\_

Signature / Date (If Required) \_\_\_\_\_

[http://www.scsk12.org/finance/files/2016/TRVL%20AUTH-EXP\\_%20Inlined%20Direct\\_01-2016.pdf](http://www.scsk12.org/finance/files/2016/TRVL%20AUTH-EXP_%20Inlined%20Direct_01-2016.pdf) (See back for Regulations)

1. Budgetary Coding goes here

2. Trip Information goes here

3. Estimated expenses goes in this column

4. The traveler completes gray area for Authorization

5. The Principal and Authorized Official completes gray area for Authorization.



## Before Travel (Need Trip ID# before incurring expenses)

### Steps to Process Travel Authorization

1. Enter the correct Budgetary Coding - Where are the funds coming from to pay for this trip?
2. Enter the travelers Name, SS# (if not on file), Position, Dept./Div./School, Destination, Purpose for Trip, Departure Date & Time, Return Date & Time (you may not know the return time until you return), and Number of Reimbursable Days.
3. Enter your estimated expenses in this column.
4. When requesting Travel Authorization, the traveler should sign and date.



### Steps to Process Travel Authorization (Cont'd)

5. All Travel Authorization requests must be authorized by an appropriate signatory. The general principle is that travel authorization should be authorized by the staff member to whom the claimant reports or his/her designee, and the form dated in the gray area.
6. **Keep a copy for your records.**
7. **Remember all district travel must be approved before Trip IDs are issued.** The traveler is responsible for reservations for airline, and hotel accommodation, as well as meeting registration.



# Travel Expense Report (See Next slide for Detailed Steps)

At this point, your "Travel Authorization and Expense Report" already contains your Trip ID #, the correct Budgetary Coding, the travelers Name, SS# (if not on file), Position, Dept./Div./School, Destination, Purpose for Trip, Departure Date & Time, Return Date & Time, Number of Reimbursable Days, and your estimated expenses. Now, please complete the actual expenses. Remember all district travel must be approved before making any arrangements.

Revised: 01.31.2016

**SHELBY COUNTY SCHOOLS**  
**TRAVEL AUTHORIZATION AND EXPENSE REPORT**  
(SEE NEXT PAGE FOR REGULATIONS)

**This form must be approved by the Authorized Official(s) and a Trip ID # assigned by FINANCE prior to making any travel arrangements.**  
[Allow 30 Calendar Days for Finance to Process Travel Request - \*\*\*NOTE: If using Federal Funds allow 60 days\*\*\*]

Travel Agency: Wright Travel (901) 767-2060 Trip I. D. # \_\_\_\_\_

--- MUST BE COMPLETED ---

EMPID # \_\_\_\_\_ Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Fund \_\_\_\_\_ Position \_\_\_\_\_ Dept./Div./School \_\_\_\_\_  
 Function \_\_\_\_\_ Destination \_\_\_\_\_ Purpose for Trip \_\_\_\_\_  
 Object \_\_\_\_\_ Departure Date \_\_\_\_\_ of \_\_\_\_\_  
 Department \_\_\_\_\_ Return Date \_\_\_\_\_ of \_\_\_\_\_  
 Location \_\_\_\_\_ (Registration Itinerary and Receipts must be attached)  
 Project \_\_\_\_\_

Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Email form to: \_\_\_\_\_

	TRIP EXPENSES			
	ESTIMATED EXPENSES	PRE-PAID NO REIMBURSEMENT	REIMBURSE TRAVELER	REIMBURSE SCHOOL
<b>I. TRANSPORTATION</b>				
Travel Agency: Wright Travel - (601) 767-2060				
(A) Airline (name) _____	\$ _____	\$ _____	\$ _____	\$ _____
(B) Parking (receipts required) _____				
(C) <input type="checkbox"/> Taxi, Shuttle, etc. (see regulations)				
<input type="checkbox"/> Board Car <input type="checkbox"/> Personal Car _____ MILES @ .54c				
<b>II. FOOD</b>				
(A) Breakfast(s) # _____ @ \$10.00 Maximum Each				
(B) Lunch(s) # _____ @ \$10.00 Maximum Each				
(C) Dinner(s) # _____ @ \$25.00 Maximum Each				
<b>III. LODGING</b> Hotel (name) _____				
Exception Justification: _____				
<b>IV. MISCELLANEOUS</b>				
Business Phone Calls, Faxes				
Registration Fees (Itinerary must be attached)				
Other: (Explain) _____				
<b>V. REIMBURSEMENT BY AN OUTSIDE AGENCY</b>				
Agency _____ Amount \$ _____				
<b>TOTAL PER COLUMN</b>	\$ _____	\$ _____ (B)	\$ _____ (C)	\$ _____ (D)
<b>TOTAL COST OF TRIP</b> (B+C+D) →		\$ _____		
<b>REFUND DUE TO YOU</b> \$ _____				
<b>REFUND DUE TO SCHOOL</b> \$ _____				

\*\*\* FOR OFFICIAL USE ONLY \*\*\*

EXPENSE CK # \_\_\_\_\_  
 Trip Canceled \_\_\_\_\_  
 Check Returned \_\_\_\_\_

I certify that the foregoing report is correct and is in compliance with SCS travel regulations.

<b>Travel Authorization</b>	<b>Expense Report</b>	<b>Travel Authorization Approval</b>	<b>Expense Approval</b>
Traveler's Signature _____	Traveler's Signature _____	Authorized Official's Signature / Date _____	Authorized Official's Signature / Date _____
Date _____	Date _____	Principal's Signature / Date _____	Principal's Signature / Date _____

Signature / Date (If Required) \_\_\_\_\_

<http://www.scs12.org/finance/files/2016/07/01/2016%20LHT-EXP-%20to%20End%2006%2001-01-2016.pdf>

(Seeback for Regulations)

1. Expenses pre-paid by SCS District.

2. Expenses paid by traveler.

3. Expenses paid by your school.

Remember to enter appropriate totals for your columns in this area.

Remember to total your columns.

4. The traveler signs and dates (yellow area).

5. The Authorized Official and Principal completes yellow area for Expense Report.



# After Travel

## Steps to Process Travel Expense

1. Enter any expenses that were pre-paid by the District in this column.
2. Enter all expenses that are to be reimbursed to you, the traveler, in this column. Attach all appropriate receipts.
3. Enter all expenses that are to be reimbursed to your school in this column. Attach all appropriate receipts and copies of school checks.



# After Travel

## Steps to Process Travel Expense (Cont'd)

4. When submitting the Travel Expense Report portion, the traveler should sign and date form in the yellow area.
5. All Travel Expense requests must be authorized by an appropriate signatory. The general principle is that travel expense should be authorized by the staff member to whom the claimant reports or his/her designee.
6. **Keep a copy of form and receipts for your records.**
7. Once the appropriate signatories have approved, submit to Finance for final processing.





# Travel Regulations For Shelby County Schools

**Travel authorization must be approved by authorized official(s); and a Trip I.D. number assigned by the Department of Accounting and Reporting prior to making any travel arrangements. Registration itinerary MUST be attached. Allow 30 calendar days to process travel requests. If using federal funds, please allow 60 days for processing.**

The Department of Accounting and Reporting will provide you with a copy of the approved form with the Trip I.D. number. This number must be given to the travel agency before charges can be made to the Shelby County Schools account. Retain duplicate to submit with your expense report.

Travel costs include out-of-town expenses for transportation, lodging, meals and incidental costs incurred while on official business for Shelby County Schools for which proper approval has been obtained. Discretion and regulations should be followed when incurring travel expenses. Supporting documentation must be maintained and attached to the Travel Expense Report form, which must be filed in the Department of Accounting and Reporting within five (5) to seven (7) calendar days after returning from the trip. **If the trip is cancelled, the Department of Accounting and Reporting should be notified immediately.**

## 1. TRANSPORTATION

- (A) Travel by scheduled airline will be at tourist class fare. If transportation costs are not prepaid by the school system, ticket stubs must be attached as supporting evidence. **Air travel insurance is not reimbursable.** Travel arrangements are to be made through the school system's authorized travel agencies.
- (B) All parking receipts must be attached as supporting evidence (regardless of the total cost of "B"). If the total cost of transportation item "B" (parking, limo, taxi, and/or shuttle service) is \$30.00 or more, each expense must be supported with a receipt to be reimbursed.



# Travel Regulations For Shelby County Schools Cont'd

## 2. **FOOD**

No receipts are expected to be maintained for meals; however, the meals should be itemized. Tips are included in this rate. Breakfast may be included **only when the trip begins before 8:00 a.m.** Dinner may be included **if the trip is concluded after 6:00 p.m.** Meals are not reimbursable if they are included in conference registration fees and cannot be claimed on your travel expense form.

Meals will be reimbursed as follows:

(A) Breakfast-\$10.00      (B) Lunch-\$10.00      (C) Dinner-\$25.00

## 3. **LODGING**

Receipts are required for lodging. Lodging reimbursement is not to exceed the U. S. General Service Administration's domestic per diem rate (GSA) {[www.gsa.gov](http://www.gsa.gov)}. Exceptions to these allowances must have prior approval (by the authorizing official and justification on travel form). Laundry is not reimbursable. When a room is shared, each person should ask for a copy of the bill for his/her share of the room cost.

## 4. **MISCELLANEOUS**

Telephone charges (long distance and local) incurred while in travel status is acceptable, if necessary in conducting school system business, and should be separately itemized under miscellaneous cost as indicated on the hotel bill. Registration fees are reimbursable under miscellaneous and require receipts as supporting evidence. Other business expenses, within reason, that are properly supported should also be claimed under this section. A maximum of \$4.00 is allowed for baggage gratuities.

**If you have any questions, please contact the Shelby County Schools' Department of Accounting and Reporting (901) 416-5461.**

Shelby County Schools does not discriminate in its programs or employment on the basis of race, color, religion, national origin, handicap/disability, sex or age.



## Contact Information

- If you have any questions, please contact Felicia Niter at 416-5599 or [niterfj@scsk12.org](mailto:niterfj@scsk12.org).
- You can also find the Travel Authorization & Expense form and the Travel Regulations on the District's website by navigating to the following:

**[www.scsk12.org](http://www.scsk12.org) / Finance / Accounting & Reporting / Forms/Additional Info / Travel Authorization Form**