LAKEWOOD PUBLIC SCHOOL DISTRICT

LAKEWOOD, NEW JERSEY 08701

 **PROFESSIONAL DEVELOPMENT REIMBURSEMENT**

NAME: DATE:

SCHOOL: POSITION:

SIGNATURE: ACCT#

PRINCIPAL / SUPERVISOR SIGNATURE:

NAME OF ATTENDED WORKSHOP/CONFERENCE/PD:

LOCATION OF ATTENDED WORKSHOP/CONFERENCE/PD:

EXPENSES INCURRED

Transportation Expense (flight/bus/train): $

Mileage(Round Trip): (Please calculate using your school address)

Mileage Expense (.31 x Mileage): $

Registration fee: $

Lodgings: $

Meals: $

Other (please explain): $

**Explanation:**

Total: $

**Original receipts must be included and attached to the form. Return completed form with receipts to the District Office – Attn: Diane Piasentini**

**REIMBURSEMENT CHECKLIST**

Lakewood Public Schools

Business Office

Lakewood, New Jersey 08701

**School Business Travel**

The following items **must be attached** to all purchase orders for School Business Travel reimbursement. The School Business Administrator shall not approve or issue payment until all required documentation and information has been submitted and verified.

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| --- | --- | --- |
| \_\_\_\_\_\_ | A. | Request for Professional Leave The Request for Professional Leave Form shall be completed and signed noting  approval dates. Attached must be a copy of the itinerary and/or agenda  of the travel event. |
| \_\_\_\_\_\_ | B.  | Professional Development Reimbursement Form The Professional Development Reimbursement Form documenting all expenses and original signatures of the employee **and Principal / Supervisor.**  |
| \_\_\_\_\_\_ | C. | Receipts All **original** receipts with date and time of expense incurred shall be  placed in an envelope and attached to the Travel Voucher. |
| \_\_\_\_\_\_ | D.  | Copy of ReportAll persons authorized to travel shall prepare and submit a brief report explaining the travel event. A copy of the travel report shall also be submitted with the purchase order for reimbursement. (Not required for visitations) |
| \_\_\_\_\_\_ | E. | Personal Vehicle Documentation (If applicable) Copy of the Vehicle Registration Copy of the Insurance Identification Card |
| \_\_\_\_\_\_ | G. | Miles Traveled – Supporting Documentation – attach one of the following:Map Quest, Google Maps, or Yahoo Maps |
| \_\_\_\_\_ | H. | Board Approval Date and Page from Board Agenda must be attached.  |