

Oak Ridge Schools

Office of the Superintendent



Administrative Procedure 2.804.2

Travel Authorization Request

Travel Authorization Request - Administrative Procedure

The Travel Authorization Request (TAR) is shown below. This is an example only and should not be used. Please download and use the fillable version to allow for electronic signatures and the most recent per diem & IRS mileage rates. **The fillable version is available on the Oak Ridge School website under Business Services Resources.** A TAR should be completed and approved prior to scheduling any travel.



OAK RIDGE SCHOOLS TRAVEL AUTHORIZATION REQUEST

Reset

Traveler Email
 Location Phone Number

Total number of Professional Leave days entered in Skyward

| | |
|--|---|
| TRAVELER Departure Date <input type="text"/> Time <input type="text"/> | EVENT Start Date <input type="text"/> Time <input type="text"/> |
| TRAVELER Return Date <input type="text"/> Time <input type="text"/> | EVENT End Date <input type="text"/> Time <input type="text"/> |

Destination: City State Zip Code
 Conference/Meeting Name
 Purpose/Benefit to District
 Type of Trip: Other Specified

| ESTIMATED EXPENSES | | | | | |
|--|-------------------------------------|----------------------|---|---|----------------------|
| Estimated Expense | Payment Method | Estimated Cost | Estimated Expense | Payment Method | Estimated Cost |
| Airfare <small>(Include ticket fees)</small> | | <input type="text"/> | Lodging | # Of Nights <input type="text"/> Rate/night <small>(inc. taxes & lodging fees)</small> | <input type="text"/> |
| Roundtrip | | \$ 0.00 | Sharing? <input type="checkbox"/> | | \$ 0.00 |
| Mileage (personal Vehicle) | Miles <input type="text"/> x \$.67 | | Meals | Number of Days <input type="text"/> GSA Per Diem Rates | |
| Rental Vehicle | | | For estimation purposes only. Meals provided by hotel or event should be deducted on your reimbursement form. | First/Last <input type="text"/> Full <input type="text"/> | \$ 0.00 |
| Other Transportation <small>(i.e. taxi, shuttle, metro)</small> | | | Registration Fee | | |
| Account(s) to be expensed | | % or \$ | Other Expenses (i.e. Gas for rental/district vehicle, Parking, Baggage Fees) | | |
| | | | TOTAL ESTIMATED COST \$ 0.00 | | |

| Signatures | | Remarks / additional information. |
|-------------------------------|------|---|
| Traveler's Signature | Date | If you have login credentials for the event, please include your login name and password below. |
| Building/Department Signature | Date | |
| Final Approval Signature | Date | |
| | | |

Note: Please click in signature box to create/insert digital signature. Save as pdf and forward to your admin assistant/bookkeeper/grant coordinator.