



CLEVELAND METROPOLITAN SCHOOL DISTRICT DISTRICT PROFESSIONAL-BUSINESS LEAVE REQUEST FORM

PROFESSIONAL MEETING/CONVENTION OFFICIAL BUSINESS UNION BUSINESS

*Human Resources will only process forms if all information is completed and if a Cost Addendum and Meeting Agenda are attached.
Forms must be received by HR at least four (4) to eight (8) weeks in advance to the actual date of the departure for leave.*

NAME OF PERSON PREPARING FORM IF DIFFERENT FROM EMPLOYEE REQUESTING LEAVE: _____

NAME (Print): _____ EMPLOYEE ID #: _____

POSITION: _____ BUILDING SITE & ROOM #: _____

DEPARTMENT: _____ SUPERVISOR _____

WORK PHONE: _____ / _____ / _____ CONTACT PHONE: _____ / _____ / _____

DATES OF CONVENTION/OFFICIAL BUSINESS MEETING: FROM: ____ / ____ / 20__ TO: ____ / ____ / 20__

TITLE OF MEETING, CONVENTION / ORGANIZATION: _____

LOCATION OF THE MEETING (CITY and STATE): _____

PURPOSE FOR ATTENDING: _____

COST OF REGISTRATION: \$ _____ WILL YOU RECEIVE COLLEGE CREDIT? YES NO

IF CONVENTION, ARE YOU CURRENTLY A PAID-UP MEMBER OF THAT ORGANIZATION? YES NO

ATTACH CONVENTION / PROGRAM AGENDA

TYPE OF REQUEST (Check appropriate box): (A) EXPENSE REIMBURSEMENT (B) LEAVE ONLY (NO REIMBURSEMENTS)

INDICATE REQUESTED EXPENSES:

(A) Air (B) Ground Travel (C) Mileage (D) Lodging (E) Meals (F) Registration (G) Other

PROVIDE THE ACCURATE ACCOUNT CODE(S) TO BE CHARGED: EXAMPLE 001.5211.2510.511.000000.001.00.000

| | | | | | | | | | | |
|----|-----------|---|---------------|---|----------|---|--------|------------|-------|------------|
| a) | _____ | • | _____ | • | _____ | • | _____ | . 000000 . | _____ | . 00 . 000 |
| | USAS-FUND | | SPEC-COST-CTR | | FUNCTION | | OBJECT | SUBJECT | OPU | IL JOB |
| b) | _____ | • | _____ | • | _____ | • | _____ | . 000000 . | _____ | . 00 . 000 |
| | USAS-FUND | | SPEC-COST-CTR | | FUNCTION | | OBJECT | SUBJECT | OPU | IL JOB |

IF A SUBSTITUTE IS REQUIRED – PROVIDE AN ACCOUNT CODE TO BE CHARGED FOR SUBSTITUTE COVERAGE

| | | | | | | | | | | |
|----|-----------|---|---------------|---|----------|---|--------|------------|-------|------------|
| c) | _____ | • | _____ | • | _____ | • | _____ | . 000000 . | _____ | . 00 . 000 |
| | USAS-FUND | | SPEC-COST-CTR | | FUNCTION | | OBJECT | SUBJECT | OPU | IL JOB |

MODE OF TRANSPORTATION: _____ (If by group travel, list names of passengers on the back)

DATE OF DEPARTURE: _____ TIME: _____ AM / PM DATE OF RETURN: _____ TIME: _____ AM / PM

APPLICANT'S SIGNATURE _____ DATE: _____ / _____ / 20__

IMMEDIATE SUPERVISOR _____ DATE: _____ / _____ / 20__

DEP. CHIEF/ACADEMIC SUP. _____ DATE: _____ / _____ / 20__

Obtain the above signatures and then submit to HR Pending with HR: _____ / _____ / 20__

BUDGET/GRANT OFFICER _____ DATE: _____ / _____ / 20__

CHIEF FINANCIAL OFFICER _____ DATE: _____ / _____ / 20__

Finance approval then return form to HR

HUMAN RESOURCES APPROVAL _____ DATE: _____ / _____ / 20__



**CLEVELAND METROPOLITAN SCHOOL DISTRICT
ESTIMATED COST ADDENDUM**

Employee's Name: _____

Air Fare \$ _____

Hotel (# of nights ___ @ \$ _____ per night, including hotel taxes) \$ _____

Meals (\$25 per day in state @ ___ days) \$ _____

Meals (\$35 per day out of state @ ___ days) \$ _____

Note: Must submit receipts to qualify for \$35 rate

Airport transportation and parking \$ _____

Rental car \$ _____

Mileage (\$0.54 per mile x _____ miles) *as of January 1, 2016* \$ _____

Registration fee \$ _____

Other – please provide detail description \$ _____

TOTAL ESTIMATED COST \$ **0.00**

Was/Is a Purchase Order involved for any of the above? Yes No

Account Number(s): _____



PROFESSIONAL-BUSINESS LEAVE PROCEDURES & TRAVEL REIMBURSEMENTS

FORMS ARE TO BE COMPLETED AND SUBMITTED 4 TO 8 WEEKS IN ADVANCE PRIOR TO ACTUAL DEPARTURE

1. TWO FORMS ARE ENCLOSED:
 - A. REQUEST FOR PROFESSIONAL-BUSINESS LEAVE
 - B. ESTIMATED COST ADDENDUM (ECA)
2. COMPLETE BOTH FORMS IN THEIR ENTIRETY. INCOMPLETE FORMS WILL BE RETURNED FOR COMPLETION.
3. INSERT THE APPROPRIATE ACCOUNT NUMBER(S) ON THE APPROPRIATE ACCOUNT LINE(S) EVEN IF THERE IS NO COST TO THE DISTRICT.
 - A. THE FIRST AND SECOND ACCOUNT LINES SUPPORT EXPENSES TO BE INCURRED.
 - B. THE THIRD ACCOUNT LINE IS FOR SUBSTITUTE CLASSROOM COVERAGE (IF APPLICABLE).
4. THE SIGNATURE OF THE APPLICANT'S IMMEDIATE SUPERVISOR IS REQUIRED AS WELL AS DEPUTY CHIEF/ ACADEMIC SUPERINTENDENT'S SIGNATURE BEFORE FORM IS SUBMITTED TO HR.
5. COMPLETE AND SUBMIT TO THE HUMAN RESOURCES DEPARTMENT THE FOLLOWING MATERIALS:
 - A. REQUEST FOR PROFESSIONAL-BUSINESS LEAVE
 - B. ESTIMATED COST ADDENDUM (ECA)
 - C. MEETING ANNOUNCEMENT/ AGENDA
6. A COPY OF THE APPROVED OR DENIED DISTRICT PROFESSIONAL-BUSINESS LEAVE REQUEST FORM WILL BE SENT TO THE LOCATION NOTED ON THE FORM.

A direct payment request and employee expense statement form will be included with copies of approved leaves of absence requesting reimbursement. **To request reimbursement, attach all original receipts and your approved request for professional-business leave to the direct payment request and employee expense statement form and submit to the accounts payable division.**

CONTACT PERSONNEL

| | | |
|-----------------------|-----------------|---------------------|
| HUMAN RESOURCES..... | (838-0054)..... | GENERAL INFORMATION |
| ACCOUNTS PAYABLE..... | (838-0380)..... | REIMBURSEMENT |

The following travel reimbursement policies are in place for District employees:

- **IN-STATE TRAVEL:** No reimbursements are allowed on the initial day of travel unless you return after 6:00 p.m. Reimbursement for dinner is \$18. No receipts are required to claim this amount. For multiple days, reimbursement is \$25 per day with no receipts. No one may receive more than this amount even with receipts. The District does not reimburse sales tax. No reimbursement will be allowed to any traveler for alcoholic beverages.
- **OUT-OF-STATE TRAVEL:** No reimbursements are allowed on the initial day of travel unless you return after 6:00 p.m. Reimbursement for dinner is up to \$23 with receipts. For multiple days, reimbursement is a maximum of \$35 per day with receipts. No one may receive more than this amount even with receipts. You may choose to follow the in-state policy above if you do not want to keep receipts. The District does not reimburse sales tax. No reimbursement will be allowed to any traveler for alcoholic beverages.
- **RECRUITERS ONLY:** Recruiters are allowed a \$5 a day incidental per diem for miscellaneous expenses. This will only be allowed when they are traveling out-of-town for more than one day in a row. No separate amount will be reimbursed for personal phone calls, snacks, etc.
- Effective January 1, 2016, the mileage rate is \$0.54 per mile. This is consistent with the current Internal Revenue Service rate.
- Gasoline may only be reimbursed for rental cars. Receipts must be provided for reimbursement of this item. No one may receive gasoline reimbursement for personal cars. This is covered in the mileage rate.
- Rental cars may only be reimbursed with proper receipts. The size and type of the vehicle must be consistent with the number of passengers.
- Certain exceptions to the above policies may be allowed for Board members and Chiefs.
- Additional information is available on our Finance Department's Accounts Payable webpage under Forms, Travel Hints: <http://www.clevelandmetroschools.org/Page/198>

**ANY ITEMS CLAIMED FOR REIMBURSEMENT WHICH SEEM UNUSUAL OR EXCESSIVE WILL BE QUESTIONED.
WRITTEN EXPLANATIONS MAY BE REQUIRED.**