



CLEVELAND METROPOLITAN SCHOOL DISTRICT REQUEST FOR PROFESSIONAL-BUSINESS LEAVE

PROFESSIONAL MEETING OR CONVENTION [] OFFICIAL BUSINESS [] UNION BUSINESS []

Please fill out completely. Forms must be completed and received at least four (4) to eight (8) weeks in advance prior to the actual date of departure for leave. Estimated Cost Addendum and Meeting Announcement/Agenda **MUST** be attached.

NAME (Print): _____ SOCIAL SECURITY NO. XXX-XX-_____

POSITION _____ BLDG SITE _____

DEPARTMENT/DIVISION _____ ROOM # _____

WORK PHONE () _____ CONTACT PHONE () _____

DATES OF CONVENTIONAL/OFFICIAL BUSINESS MEETING: FROM _____ TO _____

TITLE OF MEETING, CONVENTION / ORGANIZATION _____

LOCATION OF 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 Boxes): (A) PAY (DAILY PAY) ___ (B) EXPENSES (REIMBURSEMENT) ___

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 or PM DATE OF ARRIVAL/RETURN: _____ Time _____ AM or PM

APPLICANT'S SIGNATURE _____ DATE _____

APPROVED BY _____ IMMEDIATE SUPERVISOR DATE _____

DEP. CHIEF/ACADEMIC SUPERINTENDENT _____ DATE _____

BUDGET/GRANT OFFICER _____ DATE _____

CHIEF FINANCIAL OFFICER _____ DATE _____

HUMAN RESOURCES DESIGNEE _____ DATE _____

"THE PRIMARY GOAL OF THE CLEVELAND METROPOLITAN SCHOOL DISTRICT IS TO BECOME A PREMIER SCHOOL DISTRICT IN THE UNITED STATES OF AMERICA"



PROFESSIONAL-BUSINESS LEAVE PROCEDURES

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

1. TWO FORMS ARE ENCLOSED:
 - a. PROFESSIONAL-BUSINESS LEAVE
 - b. ESTIMATED COST ADDENDUM (ECA)

2. COMPLETE ALL REQUEST FORMS IN THEIR ENTIRETY. INCOMPLETE FORMS WILL BE RETURNED FOR COMPLETION.

3. INSERT THE APPROPRIATE ACCOUNT NUMBER(S) IN THE APPROPRIATE ACCOUNT LINE(S).
 - a. The first account line supports daily pay/expenses to be charged.
 - b. The second account line may be used as a supplement / secondary coverage.
 - c. The third account line is for substitute classroom coverage (if applicable).

4. AUTHORIZED SIGNATURE OF IMMEDIATE SUPERVISOR IS REQUIRED.

5. COMPLETE, ATTACH AND SUBMIT TO THE HUMAN RESOURCES DEPARTMENT
 - a. PROFESSIONAL-BUSINESS LEAVE,
 - b. ESTIMATED COST ADDENDUM (ECA) FORM, AND
 - c. AGENDA

6. ALL REQUEST AND ATTACHMENTS WILL BE PROCESSED IN THE APPROPRIATE MANNER.

7. EMPLOYEES WILL RECEIVE A COPY OF THEIR APPROVED PROFESSIONAL LEAVE FORM.

8. A DIRECT PAYMENT REQUEST AND EMPLOYEE EXPENSE STATEMENT FORM WILL BE ATTACHED TO APPROVED LEAVES REQUESTING REIMBURSEMENT. **TO REQUEST REIMBURSEMENT, ATTACH ALL ORIGINAL RECEIPTS TO THIS FORM AND SUBMIT TO ACCOUNTS PAYABLE DIVISION, ROOM 400 SOUTH.**

CONTACT PERSONNEL

HUMAN RESOURCES (574-8233)

GENERAL INFORMATION

PURCHASING DIVISION (574-8361)

PURCHASE ORDERS

ACCOUNTS PAYABLE (574-2217 OR 574-8237)

REIMBURSEMENT

“THE PRIMARY GOAL OF THE CLEVELAND METROPOLITAN SCHOOL DISTRICT IS TO BECOME A PREMIER SCHOOL DISTRICT IN THE UNITED STATES OF AMERICA”



CLEVELAND METROPOLITAN SCHOOL DISTRICT ESTIMATED COST ADDENDUM

(MUST be attached whether or not reimbursement is requested)

Employee Name _____

Air Fare \$ _____

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

Meals (Maximum of \$25 per day interstate @ _____ days) \$ _____

Meals (Maximum of \$35 per day out-of-state @ _____ days)
Note: receipts are required to qualify for \$35 rate \$ _____

Airport Transportation and Parking \$ _____

Rental Car \$ _____

Mileage (**\$.50 cents per mile**) effective 9/1/10 \$ _____

Registration Fee \$ _____

Other – Please Provide Detailed Description

\$ _____

\$ _____

Total Estimated Cost \$ _____

Was / Is Purchase Order involved for any of the above? YES or NO

Account Number(s) _____

“The primary goal of the Cleveland Metropolitan School District is to become a premier school district in the United States of America”



CLEVELAND METROPOLITAN SCHOOL DISTRICT TRAVEL REIMBURSEMENTS

The following travel reimbursement policies are in place for the District beginning September 1, 2010:

- **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.
- The District mileage rate is 50 cents per mile. This is consistent with the current IRS rate and may be changed periodically.
- 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.

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