

# ROCKLAND COMMUNITY COLLEGE

## Travel Request and Authorization Form

Name of Attendee	Date Submitted
Department/Discipline	
Other College Attendees	
Name of Conference	
<i>( BROCHURE OR OFFICIAL INFORMATION REGARDING THIS CONFERENCE IS TO BE ATTACHED. )</i>	
Location Of Conference	
Dates of attendance requested	

Justification: Value of the conference to program objectives or overall benefits to the College.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Budget to be charged \_\_\_\_\_ Budget Code Verified \_\_\_\_\_ INITIALS \_\_\_\_\_ DATE \_\_\_\_\_

PRE-PAID EXPENSES				
	Estimated \$	Vendor Name	Requisition #	Actual \$
Registration Fee				
Air Fare				
Car Rental				
Hotel				
Car Service				
Sub-Total				
ESTIMATED OUT OF POCKET EXPENSE				
	Departure Date: _____	Return Date: _____	Estimated \$	<b>** Actual Out of Pocket expenses are to be recorded on the back when travel is completed.</b>
Meals *	\$65.00 per day x _____ (Days) = _____			
Mileage	# of miles _____ x _____ (Mileage Rate) = _____			
Parking				
Other				
Sub-Total				
Grand Total	(Add Prepaid Expense and Estimated Out of Pocket Expense)			

### SIGNATURES

### DATE

Attendee		
Department Head		
Vice President		
Financial Analyst		
Purchasing		

## Travel Expense Form

REIMBURSABLE OUT OF POCKET EXPENSE			
	Departure Date: _____	Return Date: _____	Actual \$
Meals *	\$65.00 per day x _____ (Days) = _____		
Mileage	# of miles _____ x _____ (Mileage Rate) = _____		
Parking			
Tolls			
Other			
	Grand Total		

**\*\* Only list actual expenses that have already been approved on Side 1 and are eligible for reimbursement.**

\* Meals will be paid based on the number of days of travel. **Meal receipts are required for reimbursement.**

Daily allowable rate includes taxes and gratuities. Any meal expense over the allowable rate will **not** be reimbursed.

Certification of expenditures	
All expenses have been incurred in accordance to the guidelines of the college.	
_____ Signature of Claimant	_____ Date

Expenditures exceeding the approved amount will require VP approval.	
_____ Signature of Department Head	
_____ Signature of Vice President	_____ Date

### PRIOR TO TRAVEL:

- 1) At least four (4) weeks before the date of planned travel, it is recommended to use the travel request form as a worksheet to help summarize all you expenses.
- 2) Have requisitions entered into Banner for travel requirements, as the approvals will be made electronically. The printed form does not need to be signed.
- 3) Include any forms to cover registration, hotel, airfare, etc.
- 4) After all approvals are completed, Purchasing will make hotel reservations, book airfare/bus/train/car service. Conference registration fees are usually paid by RCC check or credit card, unless otherwise as indicated below.
- 5) Faculty and Staff members can make their own travel arrangements if desired as long it is pre-approved via requisition submission in Banner. All correct invoices and documentation must be provided. Your intention to do your own arrangements should be communicated to the Purchasing Department. Be sure to get an ST-129 NYS tax exempt form for the hotel stay if in NY state. (Form is available from Purchasing.)
- 6) Mileage is calculated with the College (or your work location) as the starting point, then on to your destination. The mileage reimbursement rate is set by the IRS on January 1st of each year. Note that your gas reimbursement is figured into the mileage rate. Tolls will be reimbursed separately. Map quest verification is required.
- 7) If you are renting a car, mileage is not reimbursed as you usually get unlimited mileage with a rental.
- 8) Also include the worker's compensation travel form with a copy of your valid driver's license.

### AFTER TRAVEL:

- 1) When your travel is completed, you will need to submit receipts to Accounts Payable for your out of pocket expenses. This may include meals, mileage, parking and tolls, etc.
- 2) Have a requisition entered into Banner for a standing order made out to the person being reimbursed.
- 3) The College has a **total** meal allowance of \$65.00 **per day**. Submit itemized receipts for all meals for which you are requesting reimbursement. Without a receipt, we will not pay your meal allowance **for that meal**. Note that the meal allowance **includes** tax and gratuities. Alcohol will not be reimbursed.
- 4) Original receipts for all pre-approved expenses must be provided for reimbursement.
- 5) Reference the PO number from the standing order made out to you when submitting your receipts to Accounts Payable.
- 6) If your total expenses exceed the amount originally approved, you must get authorization from your department head and vice president or dean before reimbursement overage can be paid.

If you have any questions or need assistance, contact Purchasing on ext. 4347 or 4573 or Accounts Payable on ext. 4297.