

**San Felipe Del Rio CISD
Student Travel Authorization & Settlement Form**

Purchase Order Numbers:

Mileage Hotel Transportation

Meals Registration Other

Campus and Organization Name: # of Male Students:

Purpose of Travel: # of Female Students:

Lead Sponsor: # of Male Sponsors:

Address of Destination: # of Female Sponsors:

City:

Estimated Date Actual Date

Leave Time Leave Time

Return Time Return Time

Mode of Transportation: **Enter the Number** of vehicles needed in the box.

Bus Activity Bus Charter

Van Air Other

Special Circumstances Notes:

Fund Function Org Yr PI OTC

Account Code:

	Estimated Expenses:	Actual Expenses:
Student Meals Obj 6412 SO 56	<input type="text"/>	<input type="text"/>
Sponsor Meals Obj 6412 SO 56	<input type="text"/>	<input type="text"/>
Driver Meals Obj 6412 SO 56	<input type="text"/>	<input type="text"/>
Registration Obj 6412 SO 10	<input type="text"/>	<input type="text"/>
Bus Obj 6494 SO 52	<input type="text"/>	<input type="text"/>
Activity Bus Obj 6494 SO 51	<input type="text"/>	<input type="text"/>
Van Obj 6494 SO 54	<input type="text"/>	<input type="text"/>
Charter Obj 6412 SO 53	<input type="text"/>	<input type="text"/>
Lodging Obj 6412 SO 55	<input type="text"/>	<input type="text"/>
Other Obj 6412	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	<input type="text"/>
	Amount Advanced:	<input type="text"/>
	Due to Traveler:	<input type="text"/>
	Due to District:	<input type="text"/>

Approval Signatures:

Return Travel Settlement Signatures (Completed):

<input type="text"/>	<p><i>TEA 1/8/15 Grant Travel Guidance- I certify that the actual costs listed above are true and correct. I understand that I may be required to validate the actual costs with detailed receipts. If actual costs are less than the advanced per diem, the traveler must reimburse the unspent funds to the district with this settlement form. Actual costs that exceed the GSA rates will not be reimbursed.</i></p>
Sponsor/Coach Date	
<input type="text"/>	
Principal/Athletic Director Date	
<input type="text"/>	Sponsor/Coach Date
<input type="text"/>	<input type="text"/>
District Officer Date	Principal/Athletic Director Date

*Highlighted in Yellow, needs to be filled in for Authorization

*Highlighted in Blue, to be filled upon return travel