TRAVEL/CONFERENCE ATTENDANCE CHECKLIST:

TRAVEL,	/Conference Attendance Request Form 10.12.1 (https://achieve.lausd.net/Page/862)
a.	
	district office, school/office name, Cost Center, employment type (i.e. classified, certificated),
r	title, work phone, email)
ļ	i. Point of contact & POC phone and email
ļ	ii. General Trip Data (start/return date & time, conference title, address, trip type & activity
Į	iii. Estimated Expenses: List expenses and check payment method boxes
b.	Complete/valid funding, i.e. FUND 010-XXXX FUNCTIONAL AREA: XXXX-XXXXX
c.	Substitute –if outside agency is sponsoring the sub, enter correct funding info
	PLEASE NOTE: Substitute rates change yearly. Please check TRAVEL DESK website for current rates.
d.	REQUIRED SIGNATURES:
	i. Principal (required on all travel requests (TR s))
Ī	ii. Local District Superintendent (required on all TRs)
Ī	iii. Chief of Staff (out-of-state/international)
	School Directors ARE NOT authorized to approve travel requests
e.	Conference Brochure/Event Flyer: should include date of event, address location, cost
☐ f.	Supporting Documents: Travel request submittals for out-of-state/international travel should
	include more than one estimate for travel expenses (i.e. airfare, hotel, car rental)
g.	Mileage reimbursement, if mileage reimbursement is in effect, provide map showing distance
	from work/school location to event location. PLEASE NOTE: Mileage rates change yearly. Please
	check the Travel Desk website for current rates.
h.	Travel requests will be submitted to the TRAVEL DESK by the LD Office once approved.
i.	Approved Travel Request Notification with Trip Number (ATRN) will be sent automatically to the
Ш"	traveler via SAP. Travel expenses ARE NOT to be paid prior to the issuance of the ATRN.
	traveler via 3Ar. Traver expenses ARE NOT to be paid prior to the issuance of the ATMI.
	AVEL EXPENSE CLAIM FORM — To be completed AFTER travel
DO	NOT SUBMIT TO TRAVEL DESK SEND TO ACCOUNTS PAYABLE ONLY
a.	All fields completed (Trip Number, employee number, name, local district, school/office name,
	title, work phone, email, date)
b.	Complete/valid funding, i.e. FUND 010-XXXX FUNCTIONAL AREA: XXXX-XXXXX
c.	Approvals
	i. Principal (required on all travel requests)
	ii. If travel is for the principal, expense claim requires LD Superintendent's approval
	School Directors ARE NOT travel request authorizers
d.	Attach copies of receipts
<u> </u> е.	Scan and email expense claim to ACCOUNTS PAYABLE: accounts-payable@lausd.net