



**Englewood Public School District
Business Office/DMHS
274 Knickerbocker Road • Englewood, NJ 07631**

REQUEST FOR WORK-RELATED TRAVEL – OVERNIGHT/OUT OF STATE TRIP(S)

Requested by: _____ **Date:** _____

Note: This form can be used for more than one person, if all are attending the same event(s).

Meeting/Conference Title and Location: _____

Purpose of Meeting/Conference: _____

Date(s) of Overnight/Out-of-State Trip(s): _____

List the following information for each individual requesting to attend this/these event(s):

Name	School	Position

On the reverse side of this form, please complete the **Estimated Cost Information** for the requested overnight/out-of-state trip(s) for each individual.

IMPORTANT!

- All requests for work-related travel must have a meeting agenda or program attached to verify the validity of said request(s).
- All requested travel must be approved by the Englewood Board of Education. **No request will be considered unless it is submitted at least 30 days prior to the date of the trip, so that it can be placed on the meeting agenda for approval by board members in a timely fashion.** Upon approval by this body, a requisition may be generated to pay for the registration fee, if applicable. **DO NOT** pay out-of-pocket for the registration fee in advance of Board approval of the trip request(s). In accordance with Title 18A:8A, such action would constitute a violation of public purchasing law.
- Upon completion of this form, please submit it to the **Assistant Superintendent of Schools** for initial review and approval.

