

PRE-AUTHORIZATION FOR TRAVEL OR ABSENCE FROM CAMPUS

INSTRUCTIONS: Please complete this form PRIOR to travel and BEFORE any funds are spent. Once you have received permission to travel, you may complete the online Travel Authorization. All reimbursements will be made upon submission of the online Travel Expense Form following the trip with all receipts attached. Complete this form in its entirety. If you are requesting an advance, please enter the amount in the ADVANCE REQUESTED section.

TRAVELER & TRIP INFORMATION

- A. Traveler's Name** (type last name, first name, middle name) _____ **Traveler's EID#** _____
- B. Department** _____ **Position Title** _____ ☐ **Contract** ☐ **Adjunct**
- C. Organization Hosting Event** _____ **Work Ext.** _____ **Substitute Needed?** ☐ **Yes** ☐ **No**
- D. Destination City & State** _____
- E. Date Conference/ Event** _____ **Begins** _____ **Ends** _____ / **Time Begins** _____ **Time Ends** _____
- F. Departure Date** _____ **Return Date** _____ / **Departure Time** _____ **Return Time** _____
- G. Brief Description & Reason for Trip** _____
- H. If the Travel is to be reimbursed from sources other than SDCCD Funds, indicate source** (ex. Grant, Conference, Personal): _____

***Travel must be considered with Education Code 87032 & District Policy 8960.2 as revised.

PLEASE ATTACH ALL SUPPORTING DOCUMENTATION TO THIS FORM PRIOR TO REQUESTING APPROVAL**ESTIMATED FUNDS REQUESTED****A. LODGING & MEALS** Single Room Rate & Meals. Meals are based on your departure and arrival time.

- ☐ **Traveler to Pay** (Reimbursable) ☐ **Check Request to Vendor** (Complete Online Once Approved)

NIGHTS: _____ Nights @ \$ _____ \$ _____

MEALS: Breakfast (\$10) _____ Lunch (\$15) _____ Dinner (\$21) _____ \$ _____

B. TRANSPORTATION:

- ☐ **Traveler to Pay** (Reimbursable) ☐ **Check Request to Vendor** (Complete Online Once Approved)

☐ Airplane ☐ Car Rental ☐ Bus/Van ☐ Car, Estimated Miles (D.O.T.) _____ @ \$0.56 per mile \$ _____

If driving, driver's name & passengers: _____

Please reference San Diego Community College District Policy AP 6310.1 for detailed information on the travel policies and procedures. Click [Here](#) for more information.

C. REGISTRATION:

- ☐ **Traveler to Pay** (Reimbursable) ☐ **Check Request to Vendor** (Complete Online Once Approved) No Registration \$ _____

D. MISCELLANEOUS:

- ☐ **Traveler to Pay** (Reimbursable) ☐ **Check Request to Vendor** (Complete Online Once Approved)

List all other expenses (ex. car rental, taxi, etc. Receipts required for items over \$5.00): _____ \$ _____

E. SUBTRACT: Meals included in registration fees:

Full Breakfast (\$10) _____ Lunch (\$15) _____ Dinner (\$21) _____ (\$ _____)

TOTAL ESTIMATED COSTS* \$ _____

FORM COMPLETED BY (TYPE NAME): _____

ADVANCE REQUESTED: \$ _____

CHARGE TO:

Line 1: FD _____	Dept _____	Prod _____	Obj _____	Amount \$ _____	Bud. Mgr. Sign _____
Line 2: FD _____	Dept _____	Prod _____	Obj _____	Amount \$ _____	Bud. Mgr. Sign _____

Traveler's signature indicates that he/she is aware of the travel policies of San Diego City College and understands that this authorization is granted subject to conformity with said policies. To the best of traveler's knowledge, costs reflect the most economical and efficient means of travel.

APPROVED

Signature of Traveler**

Traveler Printed Name

Date

☐ **Yes** ☐ **No**

Approved by Department Chair (FACULTY ONLY)

Department Chair Printed Name (FACULTY ONLY)

Date

☐ **Yes** ☐ **No**

Dean / Program Manager / Supervisor Signature

Dean / Program Manager / Supervisor Printed Name

Date

☐ **Yes** ☐ **No**

Travel Committee Signature (IF APPLICABLE)

Date

QUICK CHECKLIST

- ☐ Complete this digital form completely and correctly (do not handwrite)
- ☐ Clearly indicate if an advance is requested (Advance may not include lodging or airfare)
- ☐ Include Account Numbers with corresponding amounts
- ☐ Once you are approved, you may go online and complete the TA & TR at myportal.sdccd.edu
- ☐ Attach ALL SUPPORT DOCUMENTS including but not limited to:
 - ☐ Hotel confirmation
 - ☐ Airline itinerary & receipt
 - ☐ Conference or Event registration
 - ☐ Agenda/itinerary for Conference or Event
 - ☐ Any & all receipts relevant to travel
 - ☐ Total mileage and route details
 - ☐ MapQuest printouts (Actual map not needed ONLY ROUTES are necessary)

PLEASE NOTE: The College will only reimburse the most economical means of travel.

- ☐ Obtain ALL required signatures:
 - ☐ Traveler, Sign, Print, Date
 - ☐ Budget Manger, Sign, Print, Date on all account information lines
 - ☐ Faculty Chair (if applicable), Direct Supervisor, Sign, Print, Date
 - ☐ Dean, Program manager, or Supervisor, Sign, Print, Date
 - ☐ Travel Committee (If applicable) & Business Services, Sign, Print, Date

PLEASE NOTE: Keep all forms together when obtaining signatures

- ☐ This form must be approved and the online Travel Authorization must be completed at least 4 weeks PRIOR to travel. There must be enough time to obtain signatures and allow Accounts Payable to process payment requests.

PRE-AUTHORIZATION FOR TRAVEL INSTRUCTIONS

☐ STEP 1: COMPLETE TRAVELER & TRIP INFORMATION:

- ☐ Traveler's name
- ☐ If employee is traveling with students, include a list of students
- ☐ Traveler's EID#, Department, Position, and indicate contract or adjunct faculty
- ☐ Destination City & State
- ☐ Departure & Return Date

PLEASE NOTE: If you are flying, you are allowed a 2 hour grace period before your flight time and a 1 hour grace period after your arrival time.

- ☐ Departure & Return Time
- ☐ Date Conference/Convention Begins & Ends
- ☐ Time Conference/Convention Begins & Ends
- ☐ Brief Description & Reason for Trip
- ☐ If expenses are to be paid by a source other than the District, indicate source. Some examples are:
 - o Grant funding
 - o Conference paying for travel or lodging
 - o Your personal funds

☐ STEP 2: ESTIMATE LODGING COSTS BY COMPLETING THE SINGLE ROOM RATE & MEALS SECTION:

- ☐ Complete Single Room Rate & Meals Section for lodging expenses
- ☐ Indicate the payment method, either (please see page 2):

- Traveler to Pay: You are using personal funds to cover the cost, you will provide an itemized receipt for all expenses, and you will be reimbursed after the trip is complete
 - Voucher: You are requesting a physical check to pay for the hotel fees, the check will be issued to the hotel (not the traveler), and a completed payment request must be completed online for the hotel
 - ☐ If paying with a check, determine if the hotel has been set up as a vendor by searching for the hotel name and location in the PeopleSoft.
 - ☐ If hotel vendor is in PeopleSoft, submit the Online Payment Request
 - ☐ If the hotel vendor is not in PeopleSoft, add the hotel as a supplier using PeopleSoft and request a signed W-9 from the vendor.
 - ☐ Indicate the number of nights & the per night room rate
 - ☐ Calculate the number of meals if applicable.
- You are only able to claim meals if you are traveling for a full-day from 8am-5pm. Please see SDCCD AP 6310.1 for more information.** Meals are based on your departure and arrival times:

☐ **STEP 3: ESTIMATE TRANSPORTATION COSTS:**

- ☐ Indicate the payment method, either:
 - Traveler to Pay: You are using personal funds to cover the cost, you will provide an itemized receipt for all expenses, and you will be reimbursed after the trip is complete
 - Voucher: You are requesting a physical check to pay for the travel fees, the check will be issued to the vendor (not the traveler), and a completed payment request must be completed online for the vendor. This must be requested at least 2 weeks in advance after the TA is approved.
 - ☐ Indicate type of travel, either airplane, rental car, bus/van, or personal vehicle
 - ☐ If driving private vehicle, this means that you are driving your personal vehicle. Please specify the estimated miles you expect to drive, attach estimated routes with mileage, and list the driver's name and passenger names.
- PLEASE NOTE:** You can claim mileage to and from the airport.
- PLEASE NOTE:** If registration fee is paid, you can include in-district mileage on this form with support documents
- ☐ Rental car must be approved in advance by budget manager and included in the *miscellaneous section*.

☐ **STEP 4: ESTIMATE REGISTRATION COSTS:**

- ☐ Indicate the payment method, either:
 - Traveler to Pay: You are using personal funds to cover the cost, you will provide an itemized receipt for all expenses, and you will be reimbursed after the trip is complete
 - Voucher: You are requesting a physical check to pay for the registration fees, the check will be issued to the vendor. A completed payment request must be completed online. If the traveler pays for the registration fees in advance using personal funds, a check request can be submitted with a payment receipt to reimburse the traveler for registration expenses.

☐ **STEP 5: ESTIMATE MISCELLANEOUS COSTS:**

- ☐ List any other anticipated expenses, such as taxi or shuttle fare, parking, etc.

☐ **STEP 6: INDICATE ANY MEALS PROVIDED BY THE REGISTRATION FEE TO BE SUBTRACTED**

- ☐ **STEP 7: INCLUDE ADVANCE REQUESTED AMOUNT (IF APPLICABLE)** (Advance may not include lodging or airfare as these are paid either by the traveler and reimbursed upon return OR using a payment request online)
- ☐ **STEP 8: INCLUDE ACCURATE ACCOUNT INFORMATION WITH AMOUNTS (CAN BE COMPLETED BY SIGNERS)**
- ☐ If charging more than one Account, indicate the dollar amount by each account. (Total dollar amount for each account must equal the "Total Estimated Costs" listed on the form).
 - ☐ Ensure that funds are available **BEFORE** submitting request for approval
- ☐ **STEP 9: ATTACH SUPPORT DOCUMENTS INCLUDING BUT NOT LIMITED TO:**
- ☐ Hotel confirmation
 - ☐ Airline itinerary & receipt
 - ☐ Conference or Event registration
 - ☐ Agenda/itinerary for Conference or Event
 - ☐ Any & all receipts relevant to travel
 - ☐ Total mileage and route details if Out-of-District
 - ☐ MapQuest printouts (Actual map not needed ONLY ROUTES are necessary)
- PLEASE NOTE:** The College will only reimburse the most economical means of travel.
- PLEASE NOTE:** If a registration fee is paid, In-District mileage can also be included on this form.
- ☐ **STEP 10: TRAVELER SIGN, PRINT, AND DATE FORM**
- ☐ **STEP 11: BUDGET MANAGER SIGN, PRINT, AND DATE FORM & ANY OTHER AUTHORIZED SIGNATURES**
- ☐ Obtain signature(s) from the budget manager(s) to which travel expenses will be charged.
- ☐ **STEP 12: (IF APPLICABLE) DEPARTMENT CHAIR SIGN, PRINT, AND DATE FORM (FACULTY ONLY)**
- ☐ **STEP 13: DEAN, PROGRAM MANAGER, OR SUPERVISOR SIGN, PRINT, AND DATE FORM**
- ☐ **STEP 14: (IF APPLICABLE) CITY TRAVEL COMMITTEE REPRESENTATIVE SIGN, PRINT, AND DATE FORM**
- ☐ **STEP 14: BUSINESS/ADMINISTRATIVE SERVICES SIGN, PRINT, AND DATE FORM**
- ☐ **STEP 15: ONCE FORM IS APPROVED BY ALL PARTIES, SEND BACK TO THE TRAVELER**
- ☐ **STEP 16: TRAVELER SHOULD SCAN & ATTACH COPY OF FORM TO ONLINE AUTHORIZATION AND PAYMENT REQUESTS. TRAVELER SHOULD KEEP A COPY FOR THEIR RECORDS.**

PRE-AUTHORIZATION FOR TRAVEL OR ABSENCE FROM CAMPUS GUIDELINES

PURPOSE

This form is submitted to request prior approval:

- To conduct official College business outside of San Diego County
- To use College funds to pay for out-of-district travel expense
- To ensure that the department budget has the funds available to cover the estimated travel costs
- To travel in order to attend a convention or conference, to represent the College at a business or professional meeting, to transact official business of the College, or to carry out professional responsibilities outside employee's normal job duties ("in-district")

PERSONS AUTHORIZED

Personnel entitled to out-of-district travel reimbursement or In-district registration fees include:

- Employee (full or part-time)
- Student of San Diego City College through the Associated Student Government (ASG)
- Members of SDCCD District Board of Trustees

WHEN SHOULD YOU SUBMIT THIS FORM

- Submit completed form, with all required signatures:
 - Direct Supervisor & Department Chair (if applicable)
 - Budget Manager
 - Traveler
 - Travel Committee (if applicable)
 - Business/Administrative Services

To your Business Services at least **(30) WORKING DAYS prior** to anticipated departure date The Online Travel Authorization, Online Payment Request (if applicable) will need to be completed once this form is approved. Scan & attach this form and the support documentation to all online requests.

- An employee who completes an Online Travel Authorization, **MUST COMPLETE a online Travel Expense Report WITHIN TEN (10) DAYS AFTER THE TRIP.**
 - Any employee who does not submit their Online *Travel Expense Report* with supporting documents within 10 days after returning from the trip forfeits the right to receive any future advances for one year from the date of official notification by the Vice President of Administrative Services or designee. Any employee out of compliance may lose the privilege to travel for College Business.

OTHER RESOURCES

For additional information, please refer to:

- SDCCD Travel Policy 6310.1 [District Travel](#)
- [Please present the San Diego Community College District Hotel/Motel Transient Occupancy Waiver Exemption Claim for Government Agencies Form. This form will waive the sales tax for the room.](#)

IMPORTANT NOTES

- Travel must be via the most efficient and economical means.
- Travel reimbursement is not permitted for special entertainment, tips and gratuities, personal telephone calls, or any item of a personal nature.
- The following expenses are items that are considered to be of a personal nature, and will not be reimbursed:
 - Early Check-in Fees
 - Business or first-class upgrades
 - Aisle, window seat, or additional legroom fee
 - Travel Insurance for domestic and Canadian travel
 - Any type of personal preference that is not a required fee
 - A seating fee will be considered required *if* at the time the flight is booked, preferred seating is the *only available option* which should be documented by attaching a seat assignment to the payment method
- **If travel expenses are NOT being funded by the College (personal funds/outside funds) and you are requesting no reimbursements, keep the Pre-Authorization for travel within the**