

Reimbursement for PD, FT, CTSO

To be used when requesting reimbursement for a conference, professional development, field trip, or student organization (CTSO) event.

When requesting reimbursement for professional development, field trips, CTSO etc., the following form must be completed and returned, with detailed receipts, to CTE for processing. Final expenses will be audited and sent to the Kalamazoo RESA business office for dispensation. Note it may take up to four weeks to receive a check from Kalamazoo RESA. (Incomplete paperwork will delay processing.) Please see instructions on page 2.

Section #1: Instructor/Program Information									
Instructor Name		CTE Program			Date sent to KRESA CTE				
Request is for: (Check box that applies)	Professional Development <input type="checkbox"/>	Field Trip <input type="checkbox"/>	Student Organization (CTSO) <input type="checkbox"/>						
Name of the event:		Location of the event:							
Date(s) of event:									
Section #2: Check Request (Event documentation must accompany request)									
Check the box below indicating action you would like CTE staff to take on your behalf.									
Reimburse teacher <input type="checkbox"/>		Pay attached invoice <input type="checkbox"/>			Other: <input type="checkbox"/>				
Attached is my completed W-9 (Form can be found on https://www.kresa.org/Page/2453) <input type="checkbox"/>				I have a completed W-9 on file with Kalamazoo RESA <input type="checkbox"/>					
Section #3: Actual Expenses									
<ul style="list-style-type: none"> Reimbursement can only take place AFTER attending event (PD, FT, CTSO, etc.) Requests should be submitted within 30 days following the event and by June 30th, end of each fiscal year Original or scanned receipts with details (date and amount) are required for reimbursement 									
Expenses				Meal Expense Calculation					
Registration Fee		\$		<ul style="list-style-type: none"> Credit card summary receipts WILL NOT be accepted. Detailed, itemized receipts need to be attached KRESA CTE maximum reimbursement per meal below 					
Lodging		\$							
Travel by car: # of miles x IRS mileage rate =		\$							
Travel – Alternative		\$		Maximum Allowed:	Day 1	Day 2	Day 3	Day 4	Day 5
Meal Expense(s)		\$		Breakfast = \$10.00					
Other (Specify)		\$		Lunch = \$15.00					
Total Actual Expenses		\$		Dinner = \$24.00					
Section #4: Instructor Signature									
Signature:					Date:				
Section #5: CTE Signature									
This request is:	Approved: <input type="checkbox"/>	Denied: <input type="checkbox"/>	Reimbursement Approved for \$ _____			Budget Unit/Account # _____			
CTE Signature:					Date:				

Reimbursement Instructions

To be used when requesting reimbursement for a conference, professional development, field trip, or student organization (CTSO) event.

IMPORTANT: Keep the following points in mind when seeking reimbursement.

- ❖ Requests need to be easily understood, or processing will be delayed.
- ❖ Reimbursement requests are to be submitted within 30 days following the event and by June 30th, end of each fiscal year.
- ❖ Kalamazoo RESA/CTE will not reimburse expenses that exceed the estimated totals.
- ❖ Original or scanned receipts are essential for all reimbursements, except for mileage. Details such as date and total should be included on the receipt.
- ❖ Particulars outlining instructor reimbursement requests should be submitted on the **Reimbursement for PD, FT, CTSO Form** using subsequent instructions.

Section #1: Instructor/Program Information

- Fill out all areas entirely. **Information is needed for grant recordkeeping.**

Section #2: Check Request

- Clarify how reimbursement is to take place.
 - ✓ A current W-9 **MUST** be on file in order to receive reimbursement.
 - ✓ Invoices submitted must be made out to KRESA/CTE. If made out otherwise, a new invoice will need to be generated.

Section #3: Actual Expenses

- Fill in relevant sections under *Actual Expenses* (the box on the left) using dollar amounts.
 - ✓ Registration Fee: list registration fee that was paid along with receipt showing payment.
 - ✓ Lodging: list actual hotel expenses along with hotel receipt showing paid in full.
 - ✓ Travel by Car - Miles: Mileage calculation is to begin from work or home, whichever is less miles.
 - ✓ Travel – Alternative: list actual expenses along with a copy of bill or receipt showing paid in full.
 - ✓ Meals: Under each day of activity, enter the amount of reimbursement by meal. Reimbursement will be limited to the MAXIMUM listed on the form.
 - Credit card summary receipts are NOT accepted; DETAILED receipts are required.
 - Daily Meal Expenses: Breakfast \$10, Lunch \$15, Dinner \$24
 - ✓ Other (Specify): Brief description of item to left of \$ sign. Cost of any other items such as parking fees, tolls, etc. and cash amount to right of \$ sign.
 - ✓ Total Expenses: Provide a total reimbursable amount. (Itemized receipts need to be attached for each area, except for mileage, when requesting reimbursement.)

Section #4: Instructor Signature

- Sign and date the form.
- Reimbursement requests should be sent to the Principal's Administrative Assistant at Kalamazoo RESA CTE. Attach original Pre-Approval for PD, FT, CTSO form and get signature from CTE.
- Kalamazoo RESA cuts checks every two weeks, consequently depending upon when the request was submitted, reimbursement could take longer.
 - ✓ Reimbursement will be sent to the instructor's home address based on information found on the W-9 on file.