

Dixon Public Schools
Board Member Request for Absence Form
(Submit to Superintendent)

Submit to the Superintendent, who will include this request in the monthly list of bills presented to the School Board. Use of this form is required by Board Policy 2:125.

Name: _____ **Position:** Board Member

Name of Activity: _____ **Location/City:** _____ **Date(s)** _____

Estimated Expenses Approval Requested (50 ILCS 150/20) Purchase Order Requested – P.O. # _____

Expense Advancement Voucher Requested (105 ILCS 5/10-22.32) **Voucher Amount:** _____

ANTICIPATED COSTS: (Please attach a copy of the workshop/conference brochure)

Registration Fee: _____

Lodging Name: _____

Estimation of Meals: _____

(The district allows \$10.00 for Breakfast, \$15.00 for lunch, and \$20.00 for Dinner – this includes the 20% tip. If you go above this amount you will be responsible for the difference. Detailed receipts must be submitted to be reimbursed)

Transportation/Mileage (to and from home, please attach mileage map) **Miles** _____ X _____

Tolls: (you will need to provide receipts or IPASS print out) _____

Other Expenses: _____

Signature of requesting Board Member

To Be Completed by Superintendent:

	Approved	Denied
	Approved in Part	Exceeds Maximum Allowable Amount

TOTAL ANTICIPATED EVENT REIMBURSEMENT: _____

Charge Reimbursement to _____ / _____
(line item number) (line item title)

Signature of Superintendent/Designee

School Board Action:

	Approved	Denied
	Approved in Part	Exceeds Maximum Allowable Amount