

**COFFEE COUNTY SCHOOL SYSTEM**  
**Administrative Approval for Official Travel**

**DATE:** \_\_\_\_\_  
**NAME/TITLE:** \_\_\_\_\_  
**SCHOOL:** \_\_\_\_\_

**CONFERENCE/WORKSHOP/RELEASE TIME, ETC. DESCRIPTION:**

**Title:** \_\_\_\_\_  
**Location:** \_\_\_\_\_  
**Date(s):** \_\_\_\_\_

<b>EXPENSES:</b>	<u>Funding</u>	<u>Appropriation</u>	<u>Amount</u>
<b>Registration (Pay to):</b> _____			
<b>Address:</b> _____ _____ _____			
<b>Phone No:</b> _____	_____	_____	_____
<b>Lodging:</b> _____			
<b>Address:</b> _____ _____ _____			
<b>Phone No:</b> _____	_____	_____	_____
<b>Mileage (estimated):</b> _____ x .46 (per mile)	_____	_____	_____
<b>Other:</b> _____	_____	_____	_____
<b>Substitute Teacher:</b> _____	_____	_____	_____

**Prior approval of principal and/or Supervisor:**  
 Yes \_\_\_\_ No \_\_\_\_ **Date:** \_\_\_\_\_

**Requested by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_  
**Director's Signature** \_\_\_\_\_  
**Date**

**\*\*The signature of Director will grant approval for making reservations, use of credit card for this purpose and permission to write checks for amounts as shown (travel reimbursement forms will be signed separately).**