

Requests should be submitted
two (2) weeks prior to the
conference.

HUDSON CITY SCHOOL DISTRICT
2021-22 CONFERENCE/PROGRAM REQUEST

Asst. Supt. Date returned:

* _____
LAST NAME

FIRST NAME

FILING DATE

* _____
GRADE/SUBJECT AREA

BUILDING

COMMUTE MILES (round trip)

*HOME ADDRESS (NO PO BOXES) _____

*PROGRAM TITLE _____ DATE _____

*PROVIDER _____

*LOCATION _____ CITY _____ STATE _____

CTLE APPROVED PROVIDER? ☐ Yes ☐ No ☐ N/A (check one) HOURS _____

(Link to approved providers can be found on the HCSD website at <http://www.hudsoncsd.org/staff>)

*What do you hope to learn from this Conference/Program?

*How will learning outcomes be shared in Building/District?

*SUB NEEDED? ☐ YES ☐ NO ☐ AM ☐ PM ☐ Full Day (check)			DATE(S):
(check)			
(A) REGISTRATION FEE	PURCHASE ORDER #:	(A): \$	
(B) MILEAGE	Total trip miles driven _____	(B) \$.56/MILE (Rate good until 12/31/21 Only):	
(Please see explanation on last page with instructions for new mileage rules)	– Commute – _____	\$	
	(round trip or one-way – circle one)		
	= Reimbursable miles = _____	(Reimbursable miles x .56 if a positive number)	
(C) ANTICIPATED MEALS	(C): \$		
(D) HOTEL	EACH DAY: \$	(D) TOTAL HOTEL: \$	
BUDGET CODE: (Office Use)		TOTAL (A-D): \$	

Teacher Signature / Date

Principal Approval / Date

Director Approval (as needed) / Date

Assistant Superintendent Approval / Date

Revised 6/14/21

**YOU MUST ATTACH MILEAGE PRINTOUTS (if you are seeking mileage reimbursement)
AND CONFERENCE LITERATURE**

**COMPLETE AFTER THE CONFERENCE
AND SUBMIT WITH THE ENTIRE ORIGINAL CONFERENCE REQUEST PACKET**

**HUDSON CITY SCHOOL DISTRICT
HUDSON, NEW YORK
2021-22 CONFERENCE CLAIM FORM**

CLAIMANT'S NAME AND MAILING ADDRESS (Please Print)

NAME _____

STREET _____

CITY/STATE/ZIP _____

PROGRAM/CONFERENCE INFORMATION (Please Print)

PROGRAM TITLE _____

LOCATION _____

DATE(S) CONFERENCE/PROGRAM _____

DESCRIPTION	UNIT PRICE	TOTAL	CODE/PO#
Registration Fee			
Mileage (<i>Attach mileage printouts</i>)	Total trip miles driven _____ – Commute - _____ (round trip or one-way – circle one) = Reimbursable miles = _____	\$.56/Mi. (Rate good until 12/31/21 Only): \$ _____	
Meals			
Hotel			
GRAND TOTAL:			

***Please Attach the Complete Original Conference Request, mileage printout (if you are seeking mileage reimbursement), Certificate of Completion, and ITEMIZED receipts (Listing of purchase and cost of each)**

Claimant's Signature / Date

Assistant Superintendent Approval/Date

Applicable Office Approval (as needed) / Date

Business Office Use Only

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Purchasing Official Approval / Date

Revised 6/14/21

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CONFERENCE REQUESTS
PLEASE READ THESE INSTRUCTIONS BEFORE COMPLETING THE ATTACHED FORMS
INCOMPLETE REQUESTS WILL BE RETURNED TO APPLICANT

These forms must be completed for ALL Out of District Workshops, Trainings, Scorings, Meetings, and Visitations.
Conference/Program/Visitation Request

Trip Miles = Mileage from start place (home or building) to where you return at the end of the day (Add all segments of trip together.)

Commute Miles = Mileage from home to work and back home.

Total trip miles driven minus commute miles equals reimbursable miles.

1.) Complete Conference/Program Request Form (Page 1); attach a copy of the Conference Literature and a copy of directions for all mileage (commute and trip). Mileage will be paid as follows:

- Mileage should be based on the shortest route between the locations to be traveled provided by Google Maps.
- If leaving from and returning to your home on a contractual workday: Round trip mileage to and from conference location minus commute miles.
- If leaving from and returning to your building assignment on a contractual workday: Round trip mileage to and from conference location from your building.
- If you report to work; go to conference; and go home without returning to building assignment: Round trip mileage to and from conference location minus one way commute miles.
- If you report to a conference; go to work; and then go home: Round trip mileage to and from conference location minus one way commute miles.
- No mileage reimbursement is allowed between an employee's home and the employee's assigned work location. For job-related conferences which begin outside of the employee's normal working hours, if required by their Supervisor, including weekends, where the employees leave from the home and returns home, no deduction of commute miles is required.

Example 1: You live 10 miles from Hudson City School District.
Your round trip commute amount equals 20 miles.

You attend a full day conference in Albany, on a work day. You leave from your home and return to your home. Round trip from your house to Albany is 80 miles.

You are entitled to be reimbursed for 60 miles. (80 miles minus 20 commute miles).

Example 2: You live 15 miles from Hudson City School District in Kinderhook.
Your round trip commute amount equals 30 miles.

You attend a half day conference in Kingston (34 miles away from building), on a work day. You report to work in the morning; work a half day; drive to Kingston; and return to your home in Kinderhook - 49 miles total.

You are entitled to be reimbursed for 50 miles. (15 miles driven to work 34 miles driven to conference from work plus 49 miles from conference to return home minus 30 daily roundtrip commute miles).

OR

You live 20 miles from Hudson City School District in Rhinebeck.
Your round trip commute amount equals 40 miles.

You attend a half day conference in Kingston (34 miles away from building), on a work day. You report to work in the morning; work a half day; drive to Kingston; and return directly to your home in Rhinebeck.

You are entitled to be reimbursed for 28 miles. (20 miles driven to work plus 34 miles to conference from work to return home minus the regular 40 mile round trip daily commute.)

Example 3: You live 40 miles from Hudson City School District.
Your round trip commute amount equals 80 miles.

You attend a conference in Albany, which is 10 miles from your home on a work day. You leave from your home and return to your home. Round trip from your house is 20 miles.

You will not be entitled to any reimbursement, as the commute miles (80) is more than miles driven round trip to and from the conference (20).

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AND CONFERENCE LITERATURE

- 3.) Submit to the Building Principal for approval.
- 3.) When approved, the principal will forward the request to the office that is funding the conference/program costs (e.g., Student Services) OR if no other office is involved, directly to the Assistant Superintendent).
- 4.) When approved by funding office, the request will be forwarded to the Assistant Superintendent.
- 5.) The Assistant Superintendent will return the original approved (or denied) request to the applicant.

PLEASE NOTE: The funding office or the Assistant Superintendent will open a Purchase Order for the registration fee. A copy of this will be attached and returned with the conference request form. You may need this to register.

*All staff should plan to carpool whenever possible.

Conference/Program Reimbursement

- 1.) **AFTER THE CONFERENCE** - Complete the **Conference Claim Form** (see attached)
- 2.) ***Please submit the following to the appropriate funding office (e.g., Student Services) or to the Assistant Superintendent for approval within 10 days following the conference:***

- a. **Conference Claim Form**
- b. **Certificate of Completion**
- c. **Original Conference Request**

Please make sure you attach **original itemized receipts (Listing of purchase and cost of each).

Google Maps printout must be attached when submitting mileage claims.

There will be a deadline in June to submit claims. Any claim received after the deadline date will be refused.

Important Reminders:

- **DO NOT REGISTER for any Conference/Workshop until you have the approval from the Assistant Superintendent.**
- **Participants registering in My Learning Plan must also complete these forms in addition to and prior to the MLP forms.**
- **DO NOT SUBMIT LEAVE REQUEST IN WINCAP until you have received approval.**
- Conference Requests must be received by the Assistant Superintendent at least **2 weeks** prior to the event/registration deadline. Late requests may be denied.
- Please DO NOT change the original Conference Request Form after it is approved.
- **Registration is the responsibility of the individual seeking to attend the conference, if in doubt, call Theresa @ Ext. 2134.**
- Staff is required to complete all cost estimations on the Conference Request Form. Incomplete forms will be returned.
- Conference Claims Forms should be submitted for expenses **AFTER** the event. Please keep in mind that all receipts must be itemized and that the district cannot reimburse for sales tax or alcohol.
- Reimbursements **will not** be issued prior to completion of conference/program. Please submit the Conference Claim Form within **10 days** following the conference.
- Participants who fail to cancel a conference/workshop registration will be responsible for payment of any fees incurred for the event.
- **It is your responsibility to request a substitute if one is required.**

Your cooperation is very much appreciated!

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