

NEBRASKA DEPARTMENT OF EDUCATION AGENCY 13
OUT-OF-STATE TRAVEL REQUEST/WAIVER FORM

PART 1: THIS SECTION IS TO BE COMPLETED FOR ALL OUT-OF-STATE TRAVEL

★ Before completing this form, save it to your "N" Drive

Table with 3 columns: Name, Signature, Date

Reason for Trip:

Estimate of Costs to NDE:

Table with 4 columns: Commercial, Rental, State Vehicle, Private Vehicle, Limo/Taxi, Lodging, Meals, Registration, Miscellaneous, Total to NDE

Check One:

Professional Growth

Required Activity

Reimbursement other than to NDE (explain)

Destination and Purpose of Travel:

Table with 3 columns: Date, From-To, Activity (repeated 4 times)

PART 2: THIS SECTION IS TO BE COMPLETED FOR TRIPS THAT ARE NOT ON YOUR YEARLY TRAVEL PLANS AND FOR TRIPS THAT REQUIRE A WAIVER.

Proposed Funding Source for the Requested Travel:

Rational for the Travel:

Impact if Approval is not Granted:

Prior Out-of-State Travel for Current Fiscal Year:

Supervisors Comments:

Approval:

Supervisor's Signature, Date, Leadership Council Member's Signature, Date

Deputy Commissioner's Signature, Date (Only required for travel that is not on your yearly plan or for travel that requires a waiver)