

SJPEC Professional Development/Conference Checklist

Applying for SJPEC Professional Development/Conference funds?

Prior to registering or spending any money, please follow the steps below. This will ensure both timely approval and district reimbursement. You pay out of pocket and then get reimbursed. Courses completed and/or units earned may not be used for pay scale advancement.

Reimbursements MUST BE pre-approved: NO EXCEPTIONS!

- Print out the SJUSD travel form from “Forms and Docs” on the SJUSD Intranet. *(If applicable)*
 - Print out the SJPEC Professional Growth Reimbursement Form.
 - Estimate your expenses and write them on both forms in the spaces provided. *(\$1,500 maximum reimbursed)*
 - Fill in the remainder of the information on the SJUSD travel form (part A) and the remainder of the information requested on the SJPEC Professional Growth Reimbursement Form.
 - Sign both forms and send to your direct supervisor for approval. Your supervisor needs to sign the travel form directly below your signature and to the right of your signature on the SJPEC form.
 - Ensure you get both forms back from your supervisor.
 - Email BOTH forms and copy of PD information to Richard Judge. **No request will be considered unless your supervisor signs both forms (checklist only if no travel).**
 - Once your request is approved, Richard will email both forms back to you. At this stage, you can register, make travel arrangements, etc.
 - KEEP all ORIGINAL receipts (you need to show payment from your personal account some way as well- e.g. credit card statement). **CAL-Cards may not be used!**
 - Travel/Attend Conference. Be sure to bring back all ORIGINAL receipts including, flight, parking, hotel, etc.
 - Itemize your expenses on the SJUSD travel form (part B).
 - Attach all original receipts to the SJUSD and SJPEC forms. **Be sure to include an agenda from the conference.**
 - Send entire packet to your supervisor for final signature on the SJUSD travel form. Request that it be sent back to YOU!
 - Make a copy of the entire packet for your records.
 - Send the ORIGINAL packet (including original receipts) to Human Resources (**Melissa Koehly**) for final Assistant Superintendent sign-off. **SEND IN within 30-days of returning from your conference or completing an online course.**
- * Once HR has the documents, the administrator will check for all needed receipts and signatures. If the packet is complete and accurate, it will be forwarded to budget for payment.

*** IF any item is missing or there are no signatures, reimbursement could be severely delayed. ***



San Juan Professional Educators Coalition (SJPEC) Professional Growth Reimbursement Request

Reimbursement requests must be submitted between July 1 and May 15 of the current fiscal year, **prior to event, conference, or online learning.**

PLEASE PRINT

Name: _____ Job Title: _____

Home Address: _____ Work Location: _____

City: _____ Zip: _____ Home Phone: _____ Work Phone: _____

Title of Event/Conference: _____

Date(s) of Event/Conference: _____

The following expenditure is requested for (check one):

Improvement/enhancement/development of skills in the current job. Please explain how this relates to your current job: _____

Developing skills for promotion into another job classification. Identify the promotional job classification: _____

Training for movement into another career field. Identify the career field: _____

Itemize lists of expenditures (attach brochures, conference information, description of courses, programs, etc., for backup). **ORIGINAL** receipts for expenses must also be attached if you are requesting reimbursement. The accounts payable department cannot accept photocopies. Requests without original receipts will be returned to the employee.

Registration: \$	Transportation: \$
Tuition: \$	Food: \$
Books: \$	Lodging: \$
Professional: \$	Mileage: \$
Organization: \$	Air Travel: \$
Other (please specify): \$	(\$1,500 maximum reimbursed) Total Due: \$

Employee's Signature Date
** My signature certifies that this will not be used towards pay scale advancement.*

Supervisor's Approval

SJPEC President Signature Date

****To Be Completed by Human Resources****

Expenditure Approved in the Amount of: \$ _____ Not Approved: _____

Superintendent or Designee: _____ Date: _____
(Signature)

RETURN TO HUMAN RESOURCES
Budget code: 01.0.0. _____ .0000.9578.7410.220.000

<i>HR Use Only:</i>		
Date Paid: _____	Amount: _____	Balance: _____