General Instructions

- 1. This form has five (5) tabs Instructions, Travel Policies, Authorization, Reimbursement Report, & Insurance Form
- All college travel must be approved prior to the date of departure, including recruiting travel, for any employee without spending authority according to the DOA.
- 3. Those with spending authority need to complete the first section of he Authorization tab and submit it to the Risk Manager for every business trip/college function trip they take prior to leaving,

Instructions for the Travel Authorization

Pre-Approval

- 1. This form must be completed for all travel.
- 2. **Out of state travel** requires approval of the Department/Budget Manager **in advance**, before **ANY** registration, airline, or rental car reservations are made. Travel forms must be approved prior to any departure for travel on College business.
- 3. This form is also required for **all grant funded travel** regardless of the destination, and requires supervisory approval similar to other travel, **prior** to submitting to the Business Office.
- 4. All air travel must start/end with the Gillette airport. Special exceptions only on approval of the CFO.
- 5. Complete this form in Excel. Many of the cells are formulas to make the math easier for you.
- 6. Save this form to your desktop to complete the Travel Expense Reimbursement Report after your trip, if necessary. Some of the cells of the report are pre-populated from information on the Travel Authorization Form.
- 7. No hand written forms will be accepted, however you may print the form to sign it. You may also electronically sign and submit.
- 8. Once supervisor approval is obtained, submit the completed form to the the Business Office.
- 9. If you have any questions about how to complete this form, please contact the Business Office.

Post-Approval

- 11. Once your travel is approved, you are responsible for making your hotel and airline reservations. You must also complete any conference or event registrations. Please contact the Business Office for assistance and/or use of a college credit card.
- 12. Airfare should be booked through a travel agent or directly with the airlines. If you use Expedia, Orbitz, Travelocity or any other thirdparty booking service, it may be difficult to process changes or cancellations when needed, therefore, if you use one of those sites, any change expenses would be your responsibility unless approved by the CFO.
- 13. Hotel reservations can be made and paid with the Business Office credit card if necessary. The hotel will need to send a "Credit Card Authorization Form" to the Business Office for completion. A copy will be provided to the traveler.
- 14. After making your reservations/registration, send the confirmations or receipts or other documentation to the Business Office for payment so the receipt can be attached to the business ofice credit card report.
- 15. If attending a conference, include the conference schedule to verify any provided meals.
- 16. Per Diem will be processed automatically and the payment can be made up to seven days prior to your travel. For the quickest receipt, please complete a Direct Deposit form so that we can send the funds directly to your bank. If per diem is not requested in advance, you have ten business days after completing the trip to submit expense reimbursement requests.

Post-Travel

17. If you require a reimbursement after traveling, usually for mileage on a personal vehicle or charges for a rental car, please submit the Travel Expense Reimbursement Report within ten (10) days of the completion of your travel to the Business Office. Include receipts for all expenses you want reimbursed. Credit card statements DO NOT qualify as receipts.

How to Complete the Authorization

- 1. Visit<u>http://www.gsa.gov/portal/content/104877</u> to determine the per diem rates for your travel destination.
- Per Diem rates are per day. On <u>travel days</u> (first and last day), you will receive 75 percent of the Per Diem daily rate. On <u>non-travel</u> <u>days</u>, you will receive the full Per Diem rate. Incidental expenses are tips for taxis, drivers, bell hops, etc. and are included in the Per Diem. Reduce the amount for any meals included with the event registration or hotel reservation.
- 3. Estimated Cost of Trip For each type of cost, enter the estimated amount under the column heading that best explains how that cost will be paid. For example, registration, airfare and lodging are generally paid prior to the trip. If these expenses are paid by a PO then list them under that column. For eligible costs incurred during the travel, you would use either your Per Diem for meals and incidentals, your College MasterCard, or personal funds (this should mostly be local transportation).
- 4. Funding Sources Enter your department name(s) and account number(s) that will be charged for these expenses. The totals for all account the numbers should equal the total of all the estimated costs.

Instructions for Per Diem

Pre-Approval

- 1. Per Diems are for employees and students only.
- 2. Visit http://www.gsa.gov/portal/content/104877 to determine the per diem rates for your travel destination.
- Per Diem rates are per day. On travel days (first and last day), you will receive 75 percent of the Per Diem daily rate. On non-travel days, you will receive the full Per Diem rate. Incidental expenses are tips for taxis, drivers, bell hops, etc. and are included in the Per Diem.
- 4. If you are attending a conference or event, you must provide a copy of the schedule and details of the conference to determine if any meals are provided. Meals provided must be deducted from the total Per Diem.
- 5. You are not required to take the maximum Per Diem if your department or funding has a lower allowable amount. However, once the Per Diem is issued, you cannot ask for additional funds.
- 6. Because we pay per diems, we will not reimburse for meals and incidentals. The College does not reimburse for alcohol or entertainment. No receipts are required for per diems. -Parking and tolls will be reimbursed per receipt.
- 7. If you have any questions about how to complete this form, please contact the Business Office.

Post-Approval

8. Direct deposit is the preferred method of providing your Per Diem. If you've not already done so, please complete a BO Direct Deposit form found on the provided by the business office.

Post-Travel

- 9. Within thirty (30) days of the completion of your travel, complete a Travel Expense Reimbursement Report detailing only **additional** reimbursable expenses incurred during your travel. Do not include meals and incidental expenses covered by your Per Diem.
- 10. Give the completed Travel Expense Reimbursement Report to the Business Office. Include any receipts from your trip for which you are seeking reimbursement.

Instructions for the Travel Reimbursement Report

- 1. This form must be completed if you need a reimbursement.
- 2. Complete this form in Excel. Many of the cells are formulas to make the completion easier for you.
- 3. No hand written forms will be accepted, however you may print the form to sign it, or an electronic signature is acceptable
- 4. Tape receipts to a clean sheet of paper.
- 5. If you have any questions about how to complete this form, please contact the Business Office.
- 6. Some cells are pre-populated from the Authorization tab. If these cells need to be changed, change them on the Authorization tab and the information will be updated on the Reimbursement Report.
- 7. List each receipt on a separate line in the appropriate expense column.
- 8. If you took your own vehicle and are eligible for mileage reimbursement, enter the number of eligible miles and the formula in column 4b will calculate for you. Your normal commute to and from your home campus is not eligible for reimbursement.
- 9. Enter the total amount to be charged to each GL#. The total of all of these must equal the total of all expenses entered.

	Series 3000.21
COLLEGE FACULTY/STAFF TRAVEL PROCEDURE	
I. Conduct	
When traveling as a GCCD Employee or student representing GCCD, you are expe conduct at all times. This includes refraining from excessive drinking and partying, a addressing all others in a professional and curteous manner. Best practice discoura personal vehicles and traveling with less than three persons per vehicle.	avoiding public conflict, and
II. Reimbursement for approved College faculty and staff travel will be computed on the following schedule for	each trip.
Registrations and hotel reimbursements are designed to cover appropriate expense actual itemized receipts. Your College Credit Card can be used for all travel expense	
Employees are encouraged to rent a vehicle for all CGGD travel and are discourage automobile. When car pooling, only the vehicle owner is eligible for the reimburseme and from your home campus is not eligible for reimbursement. If an employee utiliz travel, reimbursement will be made for the actual receipted charges if prior approval flights are permitted without presidential approval. No reimbursement will be provide	ent. Your normal commute to zes commercial airlines for I is obtained. No charter
Rather than require receipts and reimburse for actual cost of meals and incidentals provide a per diem reimbursement effective September 15, 2022. No other meal or will be paid. Receipts will not be necessary for meals and incidentals. * Meals & Incidental Expenses (M&IE) are allowed up to the full daily limit per w Hotel rates do not apply - hotels will be paid per receipt.)	incidental reimbursements
 First and last day of travel are paid at 75% of M&IE per diem per Federal regul Per diem is reduced for meals that are included in a conference registration fer breakdown for breakfast, lunch and dinner are used to determine these reduction 	e or provided by a hotel. The
 Applies to out of state and out of district (in-state) travel 	
 Meals for single day trips within our district (Campbell County) are not eligible Meals for overnight trips within our district are eligible for dinner and breakfast 	
 When a travel authorization is approved by a supervisor with relavant oversigh the DOA, the business office will process the per diem requested and the trave deposit. Per Diems can be requested before or after the trip and can be paid b 	eler will get a check/direct
 Travel authorization must include the conference schedule, if applicable, and the any provided meals. 	he name of the hotel to verify
 Please contact the President or CFO for consideration of unusual circumstance 	es, such as treating guests.
* All grant travel, requires a Travel Authorization form and these per diem guide	alines will apply.
 Recruiting per diem must be requested from the Business Office using the Tra Form 	
III. All travel requests and reimbursements must be approved by the employee's immediate supervisor with spe requests requiring pre or post travel reimbursement, also needs to be submitted to the Accounting Manager payment processing. These processes and forms can be found on "the Bridge".	

	llette Community Co aculty/Staff Travel A and Per Diem R	uthorization		Out-	of-state travel frm is formula	requires approduction of the second s	vel for recruit oval at least 4 ray cells calcul	ting purposes	the date of trav hand written fo	vel.
Employee/Student Name	e			Employee	/Student #					
Destination					ure Date n Date			Time Time		
Purpose of Travel										
Conference link, if applicable	le:		Hotel link, if a	pplicable:						
	Goal Supported		Strategy	Supported						
	is form to your desktop to lete the Travel Expense									
	(Recruiters, please atta	ch Multi-Destination P	er Diem Re	quest form	instead):					
	Visit http://w	ww.gsa.gov/portal/content/	/104877 to de	termine the p	er diem rate fo	or your travel	destination.			
	Total Rate	Breakfast	Lu	Inch	Dir	ner	Incidental	Expenses		
	0									
Reduce the total by any	meals provided by a confere	% of Total Rate for the first nce or hotel. This will be t pproval. Reimbursements	he MAXIMUM	per diem allo	wed. We do r	not reimburse	for meals by		s you are treati	ing others,
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	Visit <u>https://www.gsa.gov/tra</u>									
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		Insert reimburser		-			1	-		
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	hod of Payment ==>	College PO	College N	AsterCard	Per	Diem	Person	al Funds	Total	
Registration Airfare	Trees								-	
Lodging									-	
Mileage/Fu	el Costs								-	
-	Taxi/Shuttle/Parking								-	
Per Diem/M	leals/Incidentals								-	
-	gage and Cultural Experiend								-	
Total Estim	ated Cost of Trip	-		-		-		-	-	
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				In-	State Travel			-9320		
				Out-of-	State Travel			-9320		
Fun	ding Source(s)						Account #		Amount	
Fui	Department Name				Registration		ACCOUNT #	-9740	Amount	
				- In-	State Travel			-9320		
				Out-of-	State Travel			-9320		
Total of funding	sources must equal total esti	mated cost of trip, which is	\$-			Total	of all Funding	g Sources =	-	
Out-of-State Per Dien	n Request:									
		Your Per Diem request ca	annot avcaad:	You have p	at optimated a					
Per Diem will be iss	ued approximately 7 days pri							be available a	t the Business	Office
	ou may choose to be reimbur	-								
		per diem would you like?				0				
Authorization:										
L request e	where the travel on in	diantad above in accord			tions of CC	CD				
	uthorization to travel as inc complete a Travel Expense			-			ched			
-	(10) days of the completion			,						
l have a va	lid drivers license and my	driving record is in good	l standing.							
Employee /Student	Signatura				Det-					
Employee/Student				-	Date			_		
Supervisor/Faculty	Signature			_	Date			_		
If nor diam is re-	I prior to deposition for (
	d prior to departure for trav	сі.			D-1					
Accounting Manag				-	Date			-		
	r, srankin@gillettecollege.org administrator must approve before	e submitting to Accounting Man	ager							
									Upda	ted 7/18/23
	For Grants Office	Use Only			F	or Busine	ess Office	Use Onl	y	
EPLS/SAM Data Ext #	Date	e:	No -OP							
Funds Transferred: Date		he Grant?Budget Availab Amount \$	-UK-	Amount	of Per Diem R	-	-	Voucher #	Amount	
From GL#	To GL#		-			\$0.00	_		-	

-	Gillette Community Col Travel Expense Reimburs		rt		original recei	Impor of this form is to de expenses associa ots to the back of th ula driven. No har Print the form f	etail additiona ted with this t his form. Use nd written fo	rip. other paper if rms will be ac	needed.
Name/ Address	0			Emplo	yee #			0	
Nar Add				Dates o	f Travel				
	lain what you learned can be used at GCCD.								
	Departure Time from GCCD					Arrival Tin	ne at GCCD		
List all exp	penses associated with this trip	for which you ar	e seeking re	eimburseme	nt:				
1 Date	2		3	2 Personal C	1 Cor Miloogo	5	6	7	8
Expense Incurred	Name of Business Where Exp	ense Incurred	Mode of Travel (see chart at right)	a Miles Traveled	b Calculation Miles X Rate	Transportation	Lodging	Per Diem	Total Amount
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enter amount(s)	Registration 00-000-000000 -974					A	mount GCC	D owes me:	-
	IS Travel 00-000-000000 -932 OS Travel 00-000-000000 -932								
Total F	Reimbursement (must agree with cell		1						
Authorizat	ion:		1						
	I hereby certify that this is a	valid travel claim	to the Distric	ct in accorda	nce with sta	tutes and admin	istrative pro	ocedures.	
	Employee's Signature		Date	-	Su	pervisor's Signatu	ire	-	Date
A	Accounting Manager's Signature		Date	-					
	For Grants Office U	se Only			For	Business O	ffice Us	e Only	
EPLS/SAM Da	ta Ext # D	ate:							
	e?Allowable/Justified?Allocable vailable -ORFunds Transferred: Date								
BE# From GL#	Amount \$ To GL#		-	Amount	t of Per Diem	Requested		Voucher #	Amount

Decline all offers for insurance on rented vechicles We are already covered for insurance and you will not be reimbursed for insurance charges on rental cars.

AMERICAN FAMILY HOME INSURANCE COMPANY Administration Office: 555 College Road East, Princeton, NJ 08543-5241 809 305 4954 Statatry Offeu: 1307 Rivergines Bhd, Suite 1300 - Jackservelle, FL 32207 (a stock resurgines onepary)

COMMON POLICY DECLARATIONS

POLICY NUMBER: 2NASC	30000344-01	PRIOR POLICY NUMBER: 7NA5CA0	
COMPA American Family Home 555 College Road East Princeton, NJ 08543-5 (800) 305-4954		PRODUCER NAME Wright Specialty Insurance 900 Stewart Avenue, Suite 604 Garden City, NY 11530-4869	0
NAMED INSURED: Gi	llette Community Col:	lege District	
MAILING ADDRESS: 300 Gil	0 W Sinclair St. llette, WY 82718		
POLICY PERIOD: FROM	07/01/2023	TO 07/01/2024	
		AT YOUR MAILING ADDRESS SHOW	N ABOVE.
BUSINESS DESCRIPTION	College		
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Page 1 of 2 🛛