Visionary Leaders Providing Exemplary Service



Professional Leave Request Form Guidance

- 1. Request entered in KIOSK (https://kiosk.mcoecn.org/)
- 2. <u>All Professional Leaves that require reimbursement must have a new Purchase Order in place prior to registration or travel.</u>
 - a. Add "PO's Needed" to the Comments Section so your secretary knows to cover anticipated expenses as described below, include specifics of what PO's need to be created (and to who) and describe what the "other" expenses may be.
 - Example: "PO needed for flight, hotel on PNC card. PO to "Employee Name" for mileage, ground transportation and meals
 - b. Use PO's to specific Vendors whenever possible use PNC only if absolutely necessary
 - c. PNC card (from the Treasurer)- in order to check out the PNC card from the Treasurer, you need a PO# in hand
 - Registration Fees- If there are any fees associated with registering for the event. Note in the Comment Section if a separate Vendor Purchase Order is needed.
 - · **Lodging**-can be reimbursed with taxes if necessary
 - <u>Meals</u> -list the amount (\$40.00/day allowance) in estimate regardless of whether you think you will use it
 - <u>Mileage-</u> if leaving from home, mileage is calculated from home or from ESC whatever is shorter.
 - · Other Expenses- Any expenses you may have while attending the event such as:
 - · Air Travel no mileage paid to Dayton airport
 - · Ground Transportation Taxi, Uber, etc. this is typically only needed with air travel
- 3. <u>Director/Supervisor</u> –approves Professional Leave in KIOSK.
- 4. <u>Requester-</u> once approved print the Professional Leave form and give to the secretary. Do not sign bottom of the Professional Leave form; this is for after the event is complete. This form lets the secretary know it was approved.
- 5. <u>Secretary-</u> generates all Requisitions/Purchase Orders needed. Give Purchase Order(s) to person requesting Professional Leave (can scan or email).
- **6.** <u>Registration</u>- once PO is approved, the employee can register and book as indicated on the form. Do not register for an event until you have the Purchase Order.
- 7. **Receipts** -need to be itemized –(no alcohol)
- 8. <u>Event is over-</u> employee gets the Professional Leave form back from the secretary, fills out the actual amounts spent, submits all <u>ORIGINAL</u> receipts, and signs the form at the bottom.
- 9. **Supervisor-** signs Professional Leave form approval of submitted documents/receipts.
- 10. Professional Leave is submitted for reimbursement to Treasurer's Office.



Visionary Leaders Providing Exemplary Service



Kiosk Professional Leave Detail

Must be completed for any professional leave Refer to Instructions or your supervisor for assistance

Professional Leave Details / Expense				
Event Location (Address)				
City	State	Zip Code		
Vendor Location (Address)				
City	State	Zip Code		
Purpose of Leave / Leave Description				
Estimated Costs				
Registration Fees	0 (e.g. (3,123.34) (1,002) (3456.78))			
Lodging Amount	0			
Meals Amount	(e.g. (3, 123.34) (1,002) (3456.78))			
	(e.g. (3,123.34) (1,002) (3456.78))			
Other Expenses Amount	(e.g. (3,123.34) (1,002) (3456.78))			
Mileage Rate: 0.655 X # of Miles	(e.g. (1,000) (145) (52) (5))			
Mileage Amount	(e.g. (3,123.34) (1,002) (3456.78))			
Total Leave Amount	0 (e.g. (3,123.34) (1,002) (3456.78))			
Clear Amounts		Calculate		



Visionary Leaders Providing Exemplary Service



Professional Leave Request Form

Print out after Professional Leave has been approved Give to Secretary to secure Purchase Orders pertaining to the leave (Unless otherwise directed by Supervisor)

9/2/22, 10:40 AM Print Professional Leave Form

Professional Leave Request Form

			(2022
Name:	Amy Anyanwu	Today's Date: 09/02 Position: Assis	tant Superintendent
Dates/Times:	Start Date: June 21	, 2022	Time: 07:00 AM
	End Date: June 22	, 2022	Time: 04:00 PM
Total Leave requested: 2	Day(s)		
	lice Training Edgewood Hig Nio, 44004, USA	h School 2428 Blake	Road, Ashtabula,
Professional Leave Event: 2	dgewood High School 428 Blake Road shtabula, OH 44004		
Purpose of Meeting: A	lice Training		
1	llice A Product Of Navigate 113 Medina Road Suite 700 Medina, OH 44256	360	
		EXPENSES	
Travel:	Estimated		Actual
534 miles @0.510 per mile:	\$27	2.34	
Registration Fees:	\$	0.00	
Lodging Amount:	\$	0.00	
Meals Amount:	\$12	0.00	
Other Expenses Amount:		0.00	
Total Expenses Amount:	\$39	2.34	
	** PAID RECEIPTS MUST BE A	TTACHED FOR ALL EXP	ENSES **
Comments:	PO for training and lodgir mileage needed in the amou amount of \$120		
Employee Signature:			Date:
Supervisor Signature:			Date:

After Event, fill out and sign original form.

Give to Secretary with all Original itemized receipts attached.

Once approved by your Supervisor, form and receipts will be given to Treasurer's Office to reimbursement.