

**SONORA INDEPENDENT SCHOOL DISTRICT**  
**TRAVEL REQUEST FORM**  
Revised 3/2024

Pay to the Order of: \_\_\_\_\_

Event/Location: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Time: \_\_\_\_\_

Return Date: \_\_\_\_\_ Time: \_\_\_\_\_

Advancement for Meals (for overnight travel with students only):

\_\_\_\_\_ Breakfasts @ \$8    \_\_\_\_\_ Lunches @ \$12    \_\_\_\_\_ Dinners @ \$18    \$ \_\_\_\_\_

PO # \_\_\_\_\_

# of meals dependent on time of departure/return

Advancement for Lodging (for overnight travel with students or staff travel > 2 nights only):

Lodging: # of Days \_\_\_\_\_ @ \$ \_\_\_\_\_ per day    \$ \_\_\_\_\_

LODGING PAYABLE TO \_\_\_\_\_ PO # \_\_\_\_\_

Date Vehicle Request Submitted to Bus Barn: \_\_\_\_\_

Plane Fare: \$ \_\_\_\_\_

PLANE FARE PAYABLE TO \_\_\_\_\_ PO # \_\_\_\_\_

TOTAL AMOUNT TO BE ADVANCED \$ \_\_\_\_\_

Dates checks needed/other notes: \_\_\_\_\_

I have received, read and understand the travel guidelines of Sonora ISD.

\_\_\_\_\_  
Traveler's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved by (Principal and/or Supervisor)

\_\_\_\_\_  
Date