

N.T.U. P.I.F. NECESSARY FORMS

YOU **MUST** COMPLETE STEPS 1 through 5

****COMPLETE STEP 6 ONLY IF TRAVELING OUT OF STATE****

1. Before you begin completing the PIF forms you need to obtain a Vendor ID#, referred to as the Supplier ID# on the Travel Expense Authorization Request form (TER-1). If you have attended any conferences in the past few years you may possibly already have an assigned Vendor ID#. If you do not know it, you might want to contact the Purchasing Department Phone: 973-733-6549 or 973-733-6600 FAX to inquire about it. **PLEASE NOTE THAT THE RETURN RESPONSE MIGHT TAKE SOME TIME. Therefore contact: sspriggs@nps.k12.nj.us**

If you **DO NOT** have a Vendor ID#/Supplier ID# - Please contact or email the **NBOE Division of Purchasing** at Purchasing@nps.k12.nj.us and request a Vendor ID by completing the form below to obtain the Vendor ID#. You should provide your name, your ID#, school name and a phone number where you can be contacted.

2. **TRAVEL EXPENSE AUTHORIZATION REQUEST FORM (TER-1)** Must be completed thoroughly and the requested amount for reimbursement **cannot** exceed \$700.00 on the form - even if you paid more than that. If traveling **out of state** please include in your attachments all fees and taxes included in your total hotel and airfare. (See information on #6 below).

3. **JUSTIFICATION OF NEED FORM** - Must be completely filled out for each employee.

4. **YOU MUST ATTACH A COMPLETED COPY OF THE ACTUAL CONFERENCE REGISTRATION FORM AS WELL AS THE ITINERARY (Membership fees or any other expense WILL NOT be reimbursed-please do not include in total).** Please note that you must always pay in advance the registration fee for any conference/seminar/workshop. You must submit your proof of payment (bank statement, check, Paypal or other type of payment) and the ITINERARY must show the location and dates of the conference/seminar/workshop.

5. **SUBMIT A COPY OF YOUR CAR INSURANCE WHETHER YOU ARE DRIVING OR NOT. IF DRIVING, ATTACH A ROUND TRIP COPY OF MAPQUEST OR GOOGLE MAPS FROM YOUR HOME TO THE CONFERENCE AND BACK. CALCULATIONS SHOULD BE MADE FOR **EACH DAY** OF TRAVEL.**

6. FOR OUT OF STATE TRAVEL ONLY!

MEALS AND HOTEL BREAKDOWN FORM

You must use the GSA.gov website printout list for meals and hotel stay. These documents must be included as attachments.

**** ALSO INCLUDE A BROCHURE WITH COPIES OF PAGES INDICATING REGISTRATION AND HOTEL COST WHERE YOU WILL BE ATTENDING THE CONFERENCE. ALSO, SHOW A DAILY ITINERARY FOR EACH DAY YOU PLAN TO ATTEND.**

APPLICANT:

You must submit the **ENTIRE** completed application with attachments **to the clerk in your main office**. He/She will input the information into the PeopleSoft system. Please **retain a copy of all submissions and the date you handed them** to the clerk in charge of travel for your records.

**Newark
Public Schools**
Division of Purchasing Employee Travel Vendor Set-Up



Employee Name _____

Employee Address _____

City _____ State _____ Zip Code _____

Phone Number _____

NBOE Email Address (all purchase orders will dispatch via email)

_____ THIS IS A FILLABLE PDF FORM

EMAIL YOUR COMPLETED FORM TO
PURCHASING@NPS.K12.NJ.US
TO RECEIVE YOUR PEOPLESOFT SUPPLIER ID

EMPLOYEE TRAVEL / EXPENSE CHECKOFF LIST

Submitted		Received
	Travel/Expense Authorization Request (TER-1)	
	Justification for Travel	
	Proof of Valid Car Insurance and if riding with another employee Name of Employee: Being driven by another employee _____	
	Registration Form/Invitation	
	Itinerary/Program	
	Mapquest/Google Maps Printout of roundtrip mileage for	
	GSA.gov Website Printouts (for out of state travel)	
	Meals Breakdown Form (for out of state travel)	
	Proof of Confirmed Airfare/Train (reimbursed at GSA.gov rate)	
	Proof of Confirmed Hotel Accommodations (for out of state travel, unless you have approved letter from Department of Education - reimbursed at GSA.gov rate)	
	Additional documentation:	

Received by: _____ Date: _____

Returned for missing information (date): _____

Received with corrected information (date): _____

TRAVEL / EXPENSE AUTHORIZATION REQUEST

NAME:				EMPLOYEE ID #			
TITLE:				SUPPLIER ID #			
UNION AFFILIATION: (check one)		CASA	Local 32	NTA	NTU	Unaffiliated	
FUNDING SOURCE (pick one)							
District Funds		Split Funding:		No Cost to NPS		PIF only	
TRAVEL CODE							
TYPE (pick one):		Conference/Convention:		Retreat:		Training/Seminar	
Start Date is within:		1 st - 7 th	8 th - 14 th	15 th - 21 st	22 nd - 28 th	29 th - 31 st	
DESTINATION INFORMATION:							
Event Name:							
Departure Date:				Return Date:			
Event Start Date:				Event End Date:			
Event City:						State:	
County:				Zip Code:			

					AMOUNT
Registration:	Funded by (check one):	District Funds:	PIF	No Cost	\$
Registration # 2 (if applicable)	Funded by (check one):	District Funds:	PIF	No Cost	\$
Private Auto: .47 cents per mile	Funded by (check one):	District Funds:	PIF		\$
Lodging:	Funded by (check one):	District Funds:	PIF		\$
Transportation: (Airfare/Train) Registration:	Funded by (check one):	District Funds:	PIF		\$
Meals:	Funded by (check one):	District Funds:	PIF		\$
Baggage Fees:	Funded by (check one):	District Funds:	PIF		\$
Taxi/Shuttle:	Funded by (check one):	District Funds:	PIF		\$
Parking:	Funded by (check one):	District Funds:	PIF		\$
Tolls	Funded by (check one):	District Funds:	PIF		\$
TOTAL:					\$

Employee Signature:		Date:
Approved: Principal/Supervisor (please print)		Date:
Principal/Supervisor Signature		

JUSTIFICATION OF NEED

NAME: _____

Your ID # _____

1. Relationship of attendance at this event to the critical instructional and operational needs of the district, including the link to the NJ Professional Standards for School Leaders or Teachers <https://www.nj.gov/education/profdev/standards/> and/or the New Jersey Student Learning Standards (NJSLS) <https://www.nj.gov/education/standards> as well as to the participants and/or Individual Professional Development Plan (IPDP).

2. Explanation as to how the person or persons attending will share what was learned with others in the school district.

3. Documentation that the knowledge and information to be gained at this conference cannot be obtained through more cost effective means.

4. Explanation as to how the request is consistent with best practices in professional development.

NECESSARY FORMS

N.T.U. - P.I.F.

(Part 2)

**Upon returning from your professional development,
YOU MUST complete:**

1. PURCHASING DEPARTMENT VOUCHER

You should have received a Voucher from the Purchasing Department in which you need to review, sign and return with all of your receipts and Certificate of Attendance, and you should deliver or mail it out directly to: Newark Board of Education, Purchasing Department, 765 Broad Street, Newark, NJ 07102. (Please keep a copy for your records)

2. TRAVEL AUTHORIZATION REQUEST FORM (TR-2) (see below)

- *Must be completed and signed for each employee*

3. PROOF OF PAYMENT

- *Proof of payment made towards your bill or an endorsed check (copy front/back) and;*
- *All original receipts that apply to your reimbursement that you listed in the (TER-1) Travel Expense Authorization form. Receipts must be itemized.*
- *Only three (3) receipts are allowed per day, if applicable, for breakfast, lunch and dinner. (**for out of state travel only**)*
- *If you are traveling **out of state** with other members, each member must submit their own itemized receipts.*
- ***Note:** if sharing a room, please obtain a split bill and pay your share to show proof of payment.*

4. CERTIFICATE OF ATTENDANCE AT CONFERENCE/WORKSHOP

**NEWARK BOARD OF EDUCATION
TRAVEL EXPENSE STATEMENT**

TR-2

A. THIS STATEMENT MUST BE COMPLETED WITHIN TEN DAYS AFTER EACH TRIP

PRINT NAME	EMPLOYEE ID #	TELEPHONE #
DESTINATION: (city, state)	DATES OF TRAVEL:	
TITLE OF EVENT:		

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B. DO NOT INCLUDE ITEMS CHARGED TO THE NEWARK PUBLIC SCHOOLS

	MEALS	AIR / TRAIN	PRIVATE AUTO (mileage)	HOTEL	REGISTRATION	PARKING / BAGGAGE FEES	TAXI / SHUTTLE	
DATES	ATTACH ORIGINAL ITEMIZED RECEIPTS							
TOTALS	\$	\$	\$	\$	\$	\$	\$	\$

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C. SUMMARY

(Brief report that includes the primary purpose for the travel, the key issues addressed at the event and their relevance to improving instruction or the operations of the school district).

D. DECLARATION

I HEREBY CERTIFY THAT THE ABOVE EXPENDITURES REPRESENT CASH SPENT FOR LEGITIMATE NPS BUSINESS EXPENSES ONLY AND INCLUDE NO ITEMS OF A PERSONAL NATURE.

Employee Signature

Date:

Principal / Administrator Signature

Date:

NOTE: MAKE A CLEAR COPY OF ALL RECEIPTS FOR YOUR FILES, ORIGINALS MUST BE ATTACHED

PROFESSIONAL IMPROVEMENT FUND (PIF)

Suggested/Recommended List of Conferences & Workshops for Professional Improvement

PLEASE NOTE IF THE CONFERENCE YOU ATTEND HAS A WAIVER TO ALLOW YOU TO STAY AT A HOTEL IN NJ, YOU MUST PROVIDE A COPY OF THAT WAIVER WHEN YOU SUBMIT YOUR APPLICATION.

ART/MUSIC/PHYSICAL EDUCATION

National Art Education Association (NAEA) Convention,

Link: [National Convention • National Art Education Association](#), website: www.arteducators.org

Art Educators of New Jersey (AENJ) ONLINE Conference, Link: [AENJ](#); Website: www.aenj.org

Arts Ed New Jersey Professional Learning; Various Webinars, [Arts Ed NJ Professional Learning](#), www.artsednj.org

New Jersey Music Educators Association (NJMEA) Convention; www.njmea.org

<https://www.njmea.org/state-conference>

Music Together, [Bring Music Together® to Your Neighborhood](#), www.musictogether.com

SHAPE NJ conferences; www.njahperd.org;

Thrive Arts Conference; <https://artpridenj.org/thrive>

BILINGUAL/ESL/WORLD LANGUAGE EDUCATION

New Jersey Teachers of English to Speakers of Other Languages/New Jersey Bilingual Educators (NJTESOL/NJBE), [Conference Spring](#)

National Association for Bilingual Education (NABE); www.nabe-conference.com

Foreign Language Educators of NJ Spring Conference (FLENJ); www.flenj.org/annual-conference

World Language Conferences and Workshops; <https://wlclassroom.com/workshops/>

MATHEMATICS

National Council of Teachers of Mathematics Regional Conference; [Calendar](#)

Rutgers Professional Development Programs for Grade K-12 Teachers of Mathematics, [K-12 Math Teacher Professional Development](#)

PRE-KINDERGARTEN AND KINDERGARTEN

[ASCD-ILASCD Pre-K & Kindergarten Conference](#)

PreK & Kindergarten Early Literacy [Prek & Kindergarten Conference | National Literacy](#)

Pocket of PreSchool; <https://pocketofpreschool.com/professional-development-pd-events/>

Bureau of Education & Research; <https://www.ber.org/seminars/topics/kindergarten.cfm>

SCIENCE

Science Convention; [NEW JERSEY SCIENCE CONVENTION - Home | New Jersey Science Convention](#)

New Jersey Science Teachers Association (NJSTA); <http://www.njsta.org>

New Jersey Liberty Science Center; <https://lsc.org/education/educators/professional-development>

SOCIAL STUDIES

National Council for the Social Studies (NCSS);
<https://www.socialstudies.org/conference/future-ncss-annual-conferences>

New Jersey Council for History Education (NJCHE); <http://www.njche.org/>

SOCIAL WORKERS

National Association of Social Workers (NASW); [NASW Conferences](#)

Rutgers University; [Rutgers University School of Social Work: Continuing Education](#)

Free State Social Work; [New Jersey Social Work Continuing Education](#)

SPECIAL EDUCATION

National Association of Special Education Teachers (NASET);
<https://www.naset.org/career-center/professional-development-program-pdp>

Autism Conferences; [Annual Conference](#)

AMERICAN RED CROSS OR AMERICAN HEART ASSOCIATION IMPORTANT NOTICE - CPR-AED or FIRST AID Courses can only be taken from July 1 to September 1 - for reimbursement - NO EXCEPTIONS)

<https://www.redcross.org/take-a-class/aed/aed-training/aed-classes>

<https://atlas.heart.org/home>