# **APPROVAL REQUEST FORM** **ARF #\_\_\_\_ *Revision:\_\_\_\_***

***Circle One or More:***

Meeting Conf/Training In-StateTravel Out-of-State Travel \*\*Out-of-Country Travel Official Function Online Training

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **1) Requesting Individuals/Travelers:**  *(Person Conducting Meeting ~ Training)* | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | |  | Internal Staff (CCCS) | | | | | | | | | | | |  | **External Staff** | | | | | |
| **2) ORG CODE #:** | | | | | | | | | |  | | | | | | | | | | | | **Source of Funds:** (i.e. Gen Fund, Perkins, etc.) | | | | | |  | | | | |
| **3) Type of Event/Meeting:**  *(For Training Please Provide an Agenda)* | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **4) Purpose and Justification of Travel:** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **5) Date & Time of Event/Meeting:**  ***(List Time/ Date of Departure & Return for OOS- OOC )*** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **6) Location/Destination of Event/Meeting:** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **7) Number of People Attending Meeting:** *(Please Provide Roster)* | | | | | | | | | | System Office (#) | | | | | | | | |  | | Outside Organizations- Agencies (#) | | | | | | | | | | |  |
| System Colleges (#) | | | | | | | | |  | | Board Members (#) | | | | | | | | | | |  |
| **8) Estimated Costs:**  *Early Bird Conference Deadline is:* | | | | | | **\*Fees** | | | | | | | | | | **\*Travel Costs:** | | | | | | | | **Food Costs:** | | | | **Total Costs:** | | | | |
| **Employee** | | | | | | $ | | | | | | | | | | $ | | | | | | | | $ | | | | **$** | | | | |
| **Non-Employee** | | | | | | $ | | | | | | | | | | $ | | | | | | | | $ | | | | **$** | | | | |
| \*\*\***Conf. Ctr./Other Space Rental** | | | | | | $ | | | | | | | | | | $ | | | | | | | | $ | | | | **$** | | | | |
| ***Total*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | **$** | | | | |
| **9) Meals to be provided at event/meeting:** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **10) Mode of Travel:** | |  | State Auto | | | |  | Private Auto | | | | | | |  | | **Commercial Plane - BH Travel #** | | | | | | | | | | | |  | | State Plane | |
| **11) Approvals:**  *If the ARF original costs or revisions are* ***$100 and under,*** *Budget & VP of Finance* ***do not*** *need to approve form. ARF only needs signature of Div. VP/Sup with delegated authority.* | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| **Div. Vice President & Supervisor with Delegated Signature Authority** | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | |
| **Budget - Budget has been checked & requesting individual is within their budget.** | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | |
| **Mark Superka, Vice President - Finance & Administration** **(Includes Out-of-State and \*\*Out-of Country approvals)** | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | |
| 12) \*\*Out-Of-Country Travel: | | | | | | | | |  | | | APPROVED | | | | | |  | | NOT APPROVED | | | | | | | | | | | | |
| **13) *RETURN Form To*:** | | | | | | | | | | |  | | | | | | | | | | | | | | **Ext #:** | | | | | | | |
| ***Please check the box next to items attached.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Agenda (Draft acceptable)** | | | |  | | **Roster/Attendees List** | | | | | | | | | | | | | |  | | **Perkins Expense Suppl. Info. Sheet** | | | | | | | | | |
|  | [**Travel Calculation Sheet**](file:///P:\Travel-Calculation-Sheet_NEW%20010617.xlsx)**.xls** | | | |  | | **Registration Form** | | | | | | | | | | | | | |  | | **Other:** | | | | | | | | | |
| ***Note: you do not have to print ARF/attachments in color. Black & white copies are okay.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **STATE FISCAL RULE 2-7** Official Functions and Training Functions shall be held to achieve program objectives and **must** be limited to reasonable and actual costs. The attendance of State employees at these functions shall be kept to a minimum and shall include only those individuals directly related to the purpose of the function. Expenditures shall be kept to a minimum as they have the potential of being perceived to be for personal benefit and an abuse of public funds. Official Functions shall be hosted by the Org Code Manager of a State Agency or by a representative of the State Agency that has been delegated authority by the Org Code Manager to host such functions. ***ARF–Revised 1/6/17*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**- - You do not have to attach this page to your request. - -**

**Complete an Approval Request Form (ARF) if any of the following apply:**

* If In-state travel includes an overnight hotel stay. ***Note:*** *ARF not needed for in-state mileage incurred while conducting routine job duties.*
* If Conference attendance requires a registration/conference fee from the participant.
* If food will be served at a meeting
  + Per person costs for food must be no more than the state’s allowed per diem for the meal being served. See [Authorized Per Diem Meal Reimbursement Rates.](http://www.cccs.edu/Docs/AdminFin/AuthorizedPerDiemMealReimbRates.doc)
  + Hot food catering should be kept to a minimum.
* If travel is Out-of-State and Out-of-Country. This travel **always** requires prior approval from Budget and the VP for Finance & Administration.

One ARF may be turned in bi-annually or annually for meetings that occur regularly during the year. No need to complete multiple individual ARFs for regular events.

**ARF Requirements:**

* Complete and submit the form **at least two (2) weeks prior to event**.
  + If your request has deadlines, submit ASAP to take advantage of early bird discounts, cheaper flights, etc.
* Complete the form with ALL requested information. If not complete, it will be returned for additional information.
* For Online Learning (Webinars, Webcasts Trainings, etc.) - If the cost is $250 and over, ALL signatures are required. If cost is under $250, only the supervisor with delegated authority needs to approve.
* An approved ARF is REQUIRED prior to making ANY travel or meeting arrangements or using a P-Card for an expenditure related to the event.

**Instructions for completing the Approval Request Form**

1. **Requesting Individuals/Travelers:** List all individuals who are conducting meeting/training or travelling.Check the appropriate box for **Internal Staff or External Staff** or both.
2. **ORG CODE #**: Fill out the ORG Code where the expenses will be charged. **Source of Funds:** General Fund, Student Dollars, Perkins, Grant, etc.
3. **Type of Event/Meeting:** Title of Conference or Meeting
4. **Purpose and Justification of Travel:** Purposefor attending meeting/event, especially if out-of-state.
5. **Date & Time of Event/Meeting:** Date required. Time needed if one-day event. **For Out-of-State Travel:** Use date & time of departure and return.
6. **Location/Destination of Event/Meeting:** City and State or Country
7. **Number of People Attending Meeting/Event:** Fill in the number for System Office, System Colleges, Outside Organizations, and Board Members.
8. **Estimated Costs:** Note the Registration Deadline date here. Use Travel Calculation Sheet to determine total cost.
   * **\* Fees and Travel:**  Attach more detail for these items such as a registration form, tentative hotel arrangements, breakdown of costs like airfare, car rental, parking, etc.
   * **\*\* Out-of-Country Travel:** See #12 below
   * \*\*\* **Conference Center/Other Space Rental:** *Include these charges in your ARF****.***
9. **Meals to be provided at meeting/event:** Fill in which meals or n/a.
10. **Mode of Travel:** Check the appropriate field. **For any Flight travel,** you must obtain a “BH” travel number from ***Q://Travel Log-BH Number*** or from Mary Reeves (x1536) prior to calling **Boersma Travel Agency** to make the airline reservations. You must provide the “BH” number for the travel agency to process your request
11. **Approvals:** Your Division VP or Supervisor signs first. Bring or route form to Mary Reeves in Finance. It will have an ARF # assigned to it and then be routed for approval through Grants *(if needed)*, Budget, and the VP for Finance and Administration. Once all signatures have been obtained, the original ARF will be returned to the person indicated on the form (#13).
12. **Out-of-Country Travel Approved or Not Approved:** As the delegate for the President, the VP for Finance will check the appropriate box.
13. **Contact Person-Return Form To:** Please indicate the person to contact after the form is completed and signed.

Revision to an ARF

If the amount of an ARF changes, a revision may be necessary.

* If the revision results in a difference of $100 or less, the only approval needed is from your VP or supervisor with delegated authority.
* If the revision is $101 or more, you will need to resubmit the ARF to be re-routed through the approval process.