

SPECIAL TRAVEL REIMBURSEMENT CLAIM FORM

| Name: PLEASE PRINT | School: | | | | |
|--|--|------------------------|----------------|-------------|-----------------------|
| FSD ADDENDUM - ARTICLE | 1.12 - SPECIAL TRAVE | L REIMB | <u>URSEMEN</u> | <u>NT</u> | |
| In isolated communities the I community as per the following | | need fo | r additiona | al travel t | o the nearest large |
| School Year | | | | | |
| Please check the applicable se | ction: | | | | |
| 1. Schedule A The Division shall reimburse the nearest large community. Reimbursement for travel expertage tracher, the Teacher's spouse | Only travel on non-tead nses at the most econor | hing or p nical mea | ersonal le | ave days | shall be applicable. |
| | | | \$ \$ \$ | | |
| 2. Schedule B The Division shall reimburse the nearest large community. | e Teacher for actual tra | vel costs | of one (1) | round trip | per school year to |
| Ilford to Thompson Thicket Portage to Thompson Churchill to Winnipeg (new hire | es after June 30, 2005) | | \$ \$ \$ | | |
| Teachers in Ilford and Thicket I in accordance with this article. | Portage shall be entitled | to one (1 |) additiona | l travel da | y with no loss of pay |
| TOTAL COSTS | | | \$ | | |
| NOTES: | or all items receipts i | must be | attached | l . | |
| By completing and submitting t | his form I certify that this | trip was | taken on _ | | (date) |
| EMPLOYEE SIGNATURE: | | | | DATE: | |
| SUPERINTENDENT SIGNATURE: | | | | DATE: | |
| SECRETARY-TREASURER | | | | DATE: | |