

Supervision Meeting

Fall 2008

How To: Claim Supervision Mileage

School of Teacher Education

College of Education

San Diego State University

What is supervision Mileage?

What is supervision Mileage?

- Supervisors can be reimbursed for driving to school sites throughout the semester.
- The due date for the T2, Travel Expense Claim and driving paperwork is October 2nd.
- The due date for the mileage packets is December 19th.

New Mileage Rate for the Fall

New Mileage Rate for the Fall

- The mileage rate is going from \$0.505 to \$0.585 this next semester!

Everything you need is
online

Everything you need is online

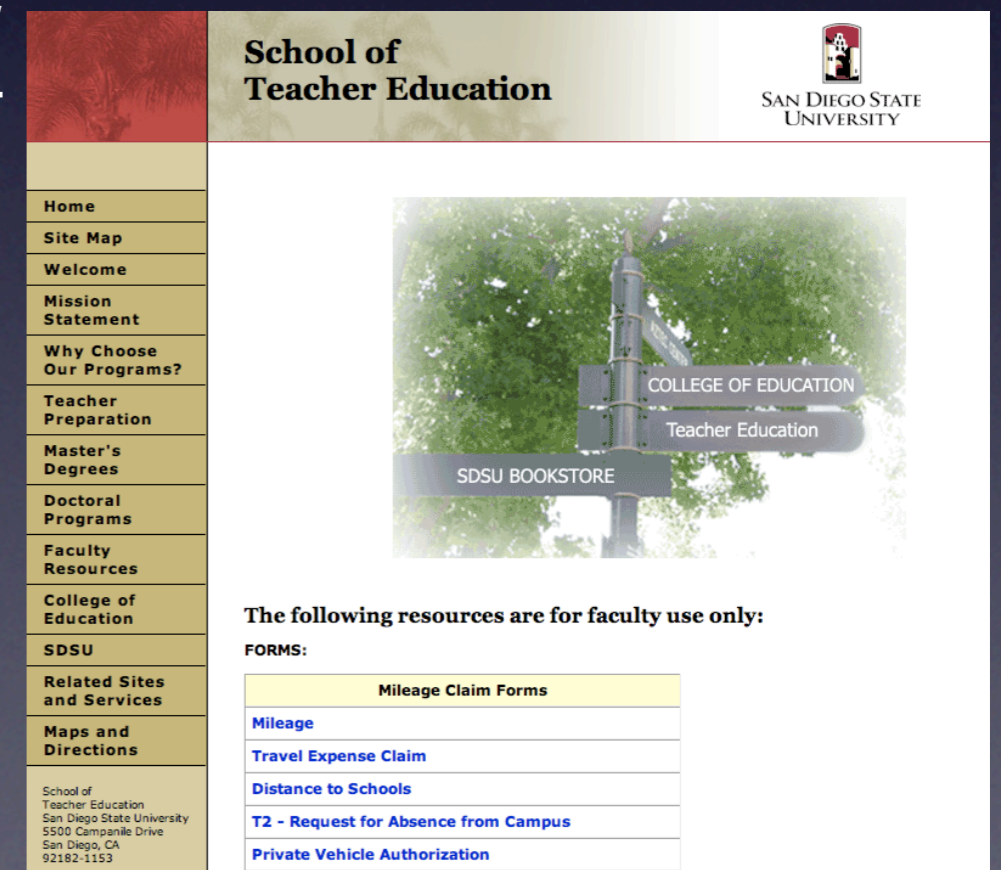
- The School of Teacher Education website has a link for faculty resources and all of the forms you will need are located there.

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- http://edweb.sdsu.edu/ste/fac_resources.htm

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The screenshot displays the website for the School of Teacher Education at San Diego State University. The header includes the school's name and the university's logo. A navigation menu on the left lists various site sections. The main content area features a photograph of a signpost with directions to the College of Education, Teacher Education, and SDSU Bookstore. Below the photo, a section titled 'The following resources are for faculty use only:' lists several forms available for download.

School of Teacher Education

SAN DIEGO STATE UNIVERSITY

Home
Site Map
Welcome
Mission Statement
Why Choose Our Programs?
Teacher Preparation
Master's Degrees
Doctoral Programs
Faculty Resources
College of Education
SDSU
Related Sites and Services
Maps and Directions

School of Teacher Education
San Diego State University
5500 Campanile Drive
San Diego, CA
92182-1153

COLLEGE OF EDUCATION
Teacher Education
SDSU BOOKSTORE

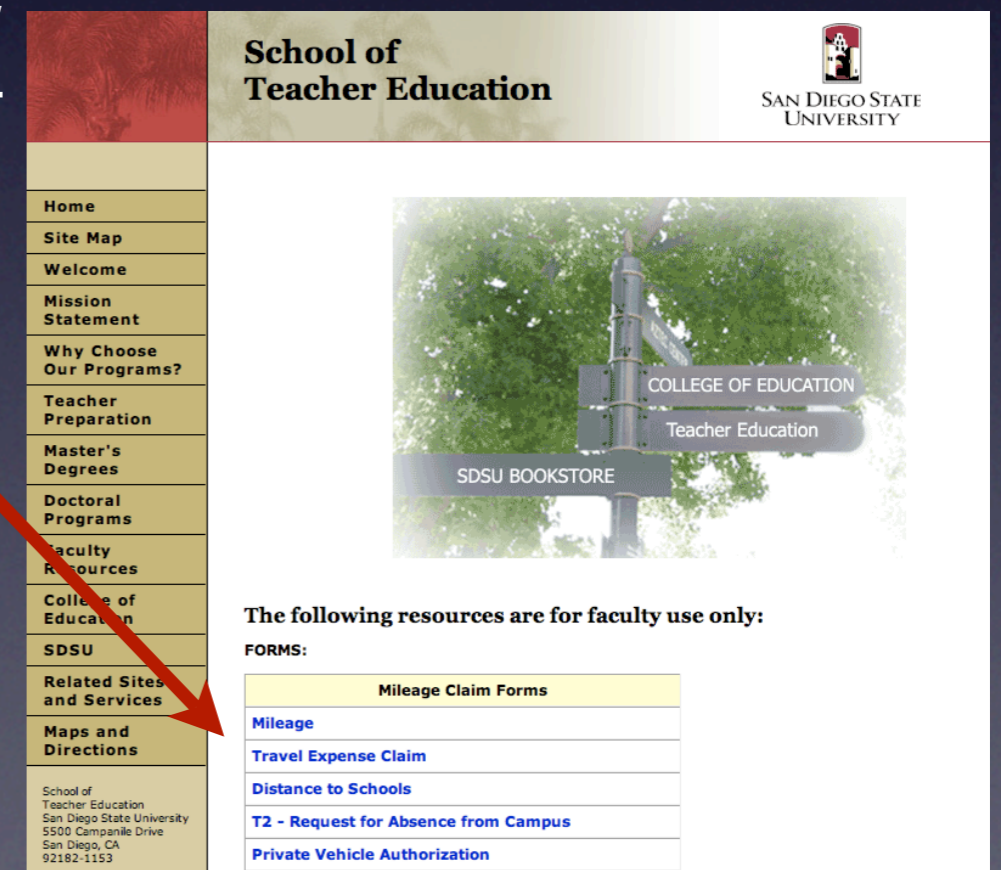
The following resources are for faculty use only:

FORMS:

Mileage Claim Forms
Mileage
Travel Expense Claim
Distance to Schools
T2 - Request for Absence from Campus
Private Vehicle Authorization

Everything you need is online

- The School of Teacher Education website has a link for faculty resources and all of the forms you will need are located there.
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The screenshot displays the website for the School of Teacher Education at San Diego State University. The page features a navigation menu on the left with the following items: Home, Site Map, Welcome, Mission Statement, Why Choose Our Programs?, Teacher Preparation, Master's Degrees, Doctoral Programs, Faculty Resources, College of Education, SDSU, Related Sites and Services, and Maps and Directions. A red arrow points from the URL in the text above to the 'Faculty Resources' link in the menu. The main content area includes the school's name, the SDSU logo, and a photograph of a signpost with directions to the College of Education, Teacher Education, and SDSU Bookstore. Below the photo, a section titled 'The following resources are for faculty use only:' lists several forms: Mileage Claim Forms, Mileage, Travel Expense Claim, Distance to Schools, T2 - Request for Absence from Campus, and Private Vehicle Authorization.

School of Teacher Education

SAN DIEGO STATE UNIVERSITY

COLLEGE OF EDUCATION
Teacher Education
SDSU BOOKSTORE

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School of Teacher Education
San Diego State University
5500 Campanile Drive
San Diego, CA
92182-1153

Forms

Forms

School of Teacher Education



SAN DIEGO STATE
UNIVERSITY

[Home](#)

[Site Map](#)

[Welcome](#)

[Mission
Statement](#)

[Why Choose
Our Programs?](#)

[Teacher
Preparation](#)

[Master's
Degrees](#)

[Doctoral
Programs](#)

[Faculty
Resources](#)

[College of
Education](#)

[SDSU](#)

[Related Sites
and Services](#)

[Maps and
Directions](#)

School of
Teacher Education
San Diego State University
5500 Campanile Drive
San Diego, CA
92182-1153



The following resources are for faculty use only:

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Mileage Claim Forms

[Mileage](#)

[Travel Expense Claim](#)


[Distance to Schools](#)

[T2 - Request for Absence from Campus](#)

[Private Vehicle Authorization](#)

Forms

- Mileage

	<h2>School of Teacher Education</h2>	 <p>SAN DIEGO STATE UNIVERSITY</p>
Home		
Site Map		
Welcome		
Mission Statement		
Why Choose Our Programs?		
Teacher Preparation		
Master's Degrees		
Doctoral Programs		
Faculty Resources		
College of Education		
SDSU		
Related Sites and Services		
Maps and Directions		
<p>School of Teacher Education San Diego State University 5500 Campanile Drive San Diego, CA 92182-1153</p>		


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Forms

- Mileage
- Travel Expense Claim

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Home		
Site Map		
Welcome		
Mission Statement		
Why Choose Our Programs?		
Teacher Preparation		
Master's Degrees		
Doctoral Programs		
Faculty Resources		
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SDSU		
Related Sites and Services		
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- Distance to Schools

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	Home		
	Site Map		
	Welcome		
	Mission Statement		
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	Teacher Preparation		
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Forms

- Mileage
- Travel Expense Claim
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- T2

	<h2>School of Teacher Education</h2>	 <p>SAN DIEGO STATE UNIVERSITY</p>	
			
	Home		
	Site Map		
	Welcome		
	Mission Statement		
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	Master's Degrees		
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Forms

- Mileage
- Travel Expense Claim
- Distance to Schools
- T2
- Private Vehicle Authorization
- NEW- Release of Driver information (EPNP)

	<h2>School of Teacher Education</h2>		 SAN DIEGO STATE UNIVERSITY						
									
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Travel Expense Claim

Travel Expense Claim

STATE OF CALIFORNIA													
TRAVEL EXPENSE CLAIM STD. 262 (REV. SDSU 10/05)												Page	of
Claimant's Name				Position				Department		Mail Coc			
Address				Headquarters Address SDSU 5500 Campanile Dr San Diego, CA 92182						Phone Number			
City		State		Zip Code		Purpose of Trip							
EXPENSES													
Date / Description			Hotel	Meals				Transportation			Other	Total	
Date	Time	Location	Lodging	Break-fast	Lunch	OT IT NC Reio Dinner	Inciden- tals	Trans- portation Cost	Trans Type	Taxi Toll Parking	\$0.485 / Mile for Private Car	Special Business Expense	Expen Per Di
											Miles	Amount	
Subtotals													
ADVANCES													
Date / Description			Hotel	Meals				Transportation			Other	Total	
Subtotals													
Claim Total			Expense				less Advance				Claim Amount		
Purpose of trip, remarks and details (Attach receipts/vouchers and additional information on separate sheets, if necessary)													
I hereby certify that the above is a true statement of the travel expenses incurred by me in accordance with the rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage.													
Claimant's Signature						Date		Signature of Officer approving payment				Date	
Preparer (Please print)						Date		Telephone					
Signature and title of authority for special expenses											Date		

T2 Form

T2 Form

San Diego State University Form T2 - Request for Absence from Campus				Date of application: _____
Advances		Transportation		
Advance Requested? Yes _____ No _____	Advance Payee (Name and phone) _____		In State Travel	_____
Amount Requested: _____		Out of State Travel		_____
Please attach remittance information for direct payments to conferences.				
Funding		Transportation		
State Funds? Yes/No? _____	Alternate Funding Yes/No? _____	Airline Travel	_____	
If yes, funding source _____		Personal Car	_____	
If reimbursement from Chancellors Office, Amount and PO# _____		Rental Car	_____	
Information on Traveler/Absence/Destination				
Name	_____		Private Vehicle License #	_____
Title	_____		Mileage (one way)	_____
Department	_____	Mail Code	_____	Number of Passengers _____
Home Address	_____		Name of Driver	_____
Dates of Absence	_____		Expenses to be Reimbursed	
Dates of Meeting	_____		Registration Fee	_____
Name of Event	_____		Airfare	_____
Reason for Absence	_____		Rental Car	_____
_____	_____		Other	_____
Destination(s)	_____		Meals	_____
_____	_____		Lodging	_____
_____	_____		Parking	_____
_____	_____		Other (specify)	_____
_____	_____		Maximum Reimbursement	_____
Account Information				
Account Number	_____		Amount	_____
Account Number	_____		Amount	_____
I have made arrangements for the classes meeting during my absence and/or for administrative and other duties.				
I certify that if I am using a privately owned vehicle, I have a current "Authorization to Use Privately Owned Vehicle" (Form STD 261) on file with the University and I have minimum liability insurance as required by State law. I am in possession of a valid California drivers license. I certify that I have not been issued more than three moving violations nor have I been responsible for more than three accidents, or any combination of three incidents during the past 12 month period. If renting a vehicle from a rental agency or using a personal vehicle, I certify that I have completed the required Defensive Driving course. I certify that I am currently a California State University employee (Required if receiving reimbursement through the State).				
Advances: I hereby certify that the above travel advance is necessary to defray my anticipated reimbursable expenses while traveling on business for San Diego State University away from my designated headquarters. I understand and agree that this amount may be deducted from any other University reimbursements or California tax refund payable to me in the event it is not reimbursed by a Travel Expense Claim within 30 days of issuance, or upon separation from this agency.				
Signature of Traveler: _____				
Approvals				
Department Chair or Supervisor:	_____		Date	_____
Dean or Designee:	_____		Date	_____
VP or Designee (out of state travel per E.O. 688)	_____		Date	_____
Document Prepared by:	_____		Telephone	_____

T2 Form

- Fill out the “Information on Traveler” on the left side.

San Diego State University Form T2 - Request for Absence from Campus		Date of application: _____
Advances		Transportation
Advance Requested? Yes _____ No _____		In State Travel _____
Advance Payee (Name and phone) _____		Out of State Travel _____
Amount Requested: _____		Airline Travel _____
Please attach remittance information for direct payments to conferences.		Personal Car _____
Funding		Rental Car _____
State Funds? Yes/No? _____ Alternate Funding Yes/No? _____		Private Vehicle License # _____
If yes, funding source _____		Mileage (one way) _____
If reimbursement from Chancellors Office, Amount and PO# _____		Number of Passengers _____
Information on Traveler/Absence/Destination		Name of Driver _____
Name _____		Expenses to be Reimbursed
Title _____		Registration Fee _____
Department _____ Mail Code _____		Airfare _____
Home Address _____		Rental Car _____
Dates of Absence _____		Other _____
Dates of Meeting _____		Meals _____
Name of Event _____		Lodging _____
Reason for Absence _____		Parking _____
Destination(s) _____		Other (specify) _____
		Maximum Reimbursement _____
Account Information		
Account Number _____		Amount _____
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Approvals		
Department Chair or Supervisor: _____		Date _____
Dean or Designee: _____		Date _____
VP or Designee (out of state travel per E.O. 688) _____		Date _____
Document Prepared by: _____		Telephone _____

T2 Form

- Fill out the “Information on Traveler” on the left side.
- Under “Transportation” on the Right, check “In State Travel” and type in the Private Vehicle License #, as well as your name under the driver

San Diego State University Form T2 - Request for Absence from Campus				Date of application: _____
Advances		Transportation		
Advance Requested? Yes _____ No _____	In State Travel _____			_____
Advance Payee (Name and phone) _____	Out of State Travel _____			_____
Amount Requested: _____	Airline Travel _____			_____
Please attach remittance information for direct payments to conferences.		Personal Car _____		
Funding		Rental Car _____		
State Funds? Yes/No? _____ Alternate Funding Yes/No? _____	Private Vehicle License # _____			_____
If yes, funding source _____	Mileage (one way) _____			_____
If reimbursement from Chancellors Office, Amount and PO# _____	Number of Passengers _____			_____
Information on Traveler/Absence/Destination		Name of Driver _____		
Name _____	Registration Fee _____			_____
Title _____	Airfare _____			_____
Department _____ Mail Code _____	Rental Car _____			_____
Home Address _____	Other _____			_____
Dates of Absence _____	Meals _____			_____
Dates of Meeting _____	Lodging _____			_____
Name of Event _____	Parking _____			_____
Reason for Absence _____	Other (specify) _____			_____
Destination(s) _____	Maximum Reimbursement _____			_____
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Department Chair or Supervisor: _____	Date _____			_____
Dean or Designee: _____	Date _____			_____
VP or Designee (out of state travel per E.O. 688) _____	Date _____			_____
Document Prepared by: _____	Telephone _____			_____

T2 Form

- Fill out the “Information on Traveler” on the left side.
- Under “Transportation” on the Right, check “In State Travel” and type in the Private Vehicle License #, as well as your name under the driver
- Sign at “Signature of Traveler” towards the bottom

San Diego State University Form T2 - Request for Absence from Campus		Date of application: _____
Advances		Transportation
Advance Requested? Yes _____ No _____		In State Travel _____
Advance Payee (Name and phone) _____		Out of State Travel _____
Amount Requested: _____		Airline Travel _____
Please attach remittance information for direct payments to conferences.		Personal Car _____
Funding		Rental Car _____
State Funds? Yes/No? _____ Alternate Funding Yes/No? _____		Private Vehicle License # _____
If yes, funding source _____		Mileage (one way) _____
If reimbursement from Chancellors Office, Amount and PO# _____		Number of Passengers _____
Information on Traveler/Absence/Destination		Name of Driver _____
Name _____		Expenses to be Reimbursed
Title _____		Registration Fee _____
Department _____ Mail Code _____		Airfare _____
Home Address _____		Rental Car _____
Dates of Absence _____		Other _____
Dates of Meeting _____		Meals _____
Name of Event _____		Lodging _____
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Destination(s) _____		Other (specify) _____
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Document Prepared by: _____		Telephone _____

T2 Form

- Fill out the “Information on Traveler” on the left side.
- Under “Transportation” on the Right, check “In State Travel” and type in the Private Vehicle License #, as well as your name under the driver
- Sign at “Signature of Traveler” towards the bottom

San Diego State University Form T2 - Request for Absence from Campus		Date of application: _____
Advances		Transportation
Advance Requested? Yes _____ No _____		In State Travel _____
Advance Payee (Name and phone) _____		Out of State Travel _____
Amount Requested: _____		Airline Travel _____
Please attach remittance information for direct payments to conferences.		Personal Car _____
Funding		Rental Car _____
State Funds? Yes/No? _____ Alternate Funding Yes/No? _____		Private Vehicle License # _____
If yes, funding source _____		Mileage (one way) _____
If reimbursement from Chancellors Office, Amount and PO# _____		Number of Passengers _____
Information on Traveler/Absence/Destination		Name of Driver _____
Name _____		Expenses to be Reimbursed
Title _____		Registration Fee _____
Department _____ Mail Code _____		Airfare _____
Home Address _____		Rental Car _____
Dates of Absence _____		Other _____
Dates of Meeting _____		Meals _____
Name of Event _____		Lodging _____
Reason for Absence _____		Parking _____
Destination(s) _____		Other (specify) _____
		Maximum Reimbursement _____
Account Information		
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VP or Designee (out of state travel per E.O. 688) _____		Date _____
Document Prepared by: _____		Telephone _____

T2 Form

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- Under “Transportation” on the Right, check “In State Travel” and type in the Private Vehicle License #, as well as your name under the driver
- Sign at “Signature of Traveler” towards the bottom

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Title _____		Registration Fee _____
Department _____ Mail Stop _____		Airfare _____
Home Address _____		Rental Car _____
Dates of Absence _____		Other _____
Dates of Meeting _____		Meals _____
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Account Number _____	Amount _____	
I have made arrangements for the classes meeting during my absence and/or for administrative and other duties.		
I certify that if I am using a privately owned vehicle, I have a current "Authorization to Use Privately Owned Vehicle" (Form STD 261) on file with the University and I have minimum liability insurance as required by State law. I am in possession of a valid California drivers license. I certify that I have not been issued more than three moving violations nor have I been responsible for more than three accidents, or any combination of three incidents during the past 12 month period. If renting a vehicle from a rental agency or using a personal vehicle, I certify that I have completed the required Defensive Driving course. I certify that I am currently a California State University employee (Required if receiving reimbursement through the State).		
Advances: I hereby certify that the above travel advance is necessary to defray my anticipated reimbursable expenses while traveling on business for San Diego State University away from my designated headquarters. I understand and agree that this amount may be deducted from any other University reimbursements or California tax refund payable to me in the event it is not reimbursed by a Travel Expense Claim within 30 days of issuance, or upon separation from this agency.		
Signature of Traveler: _____		
Approvals		
Department Chair or Supervisor: _____	Date _____	
Dean or Designee: _____	Date _____	
VP or Designee (out of state travel per E.O. 688) _____	Date _____	
Document Prepared by: _____	Telephone _____	

T2 Form

- Fill out the “Information on Traveler” on the left side.
- Under “Transportation” on the Right, check “In State Travel” and type in the Private Vehicle License #, as well as your name under the driver
- Sign at “Signature of Traveler” towards the bottom

San Diego State University Form T2 - Request for Absence from Campus		Date of application: _____
Advances		Transportation
Advance Requested? Yes _____ No _____		In State Travel _____
Advance Payee (Name and phone) _____		Out of State Travel _____
Amount Requested: _____		Airline Travel _____
Please attach remittance information for direct payments to conferences.		Personal Car _____
Funding		Rental Car _____
State Funds? Yes/No? _____ Alternate Funding Yes/No? _____		Private Vehicle License # _____
If yes, funding source _____		Mileage (one way) _____
If reimbursement from Chancellors Office, Amount and PO# _____		Number of Passengers _____
Information on Traveler/Absence/Destination		Name of Driver _____
Name _____		Expenses to be Reimbursed
Title _____		Registration Fee _____
Department _____ Mail Stop _____		Airfare _____
Home Address _____		Rental Car _____
Dates of Absence _____		Other _____
Dates of Meeting _____		Meals _____
Name of Event _____		Lodging _____
Reason for Absence _____		Parking _____
Destination(s) _____		Other (specify) _____
		Maximum Reimbursement _____
Account Information		
Account Number _____	Amount _____	
Account Number _____	Amount _____	
I have made arrangements for the classes meeting during my absence and/or for administrative and other duties.		
I certify that if I am using a privately owned vehicle, I have a current "Authorization to Use Privately Owned Vehicle" (Form STD 261) on file with the University and I have minimum liability insurance as required by State law. I am in possession of a valid California drivers license. I certify that I have not been issued more than three moving violations nor have I been responsible for more than three accidents, or any combination of three incidents during the past 12 month period. If renting a vehicle from a rental agency or using a personal vehicle, I certify that I have completed the required Defensive Driving course. I certify that I am currently a California State University employee (Required if receiving reimbursement through the State).		
Advances: I hereby certify that the above travel advance is necessary to defray my anticipated reimbursable expenses while traveling on business for San Diego State University away from my designated headquarters. I understand and agree that this amount may be deducted from any other University reimbursements or California tax refund payable to me in the event it is not reimbursed by a Travel Expense Claim within 30 days of issuance, or upon separation from this agency.		
Signature of Traveler: _____		
Approvals		
Department Chair or Supervisor: _____	Date _____	
Dean or Designee: _____	Date _____	
VP or Designee (out of state travel per E.O. 688) _____	Date _____	
Document Prepared by: _____	Telephone _____	

Mileage Form

Distance to Schools

- The list consists of one-way mileage to most of the schools that supervisors will visit.
- If there is a school that you have visited but do not see on the list, please notify the front desk (4-6131) and he will find the distance for you.
- Make sure that when inputting mileage on the monthly forms that you only put one-way mileage.

Private Vehicle Authorization/ EPNP

- In order to be authorized for driving on University business, you must complete a few other requirements.
- Take a defensive driving course through SDSU every four years
- Enroll in the EPNP (Employer Pull Notice Program), which allows Public Safety to make sure you have a good driving record. You must enroll in the EPNP every year.
- If you have not done any of these, please contact Anthony, admste@mail.sdsu.edu, so that he can help you ASAP.

DON'T FORGET!

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- October 2nd is the deadline for turning in your T2, Travel Expense claim and driving paperwork.

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- December 19th is the deadline for turning in your mileage packets!

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- October 2nd is the deadline for turning in your T2, Travel Expense claim and driving paperwork.
- December 19th is the deadline for turning in your mileage packets!
- Mark your calendars

That's All, Folks!

- If you have any questions at all, please contact the front desk at 619-594-6131 or e-mail admste@mail.sdsu.edu