

**EXHIBIT A**

**YOLO COUNTY SPECIAL EDUCATION LOCAL PLAN AREA (SELPA)  
DISTRICT OUT OF COUNTY PRIOR APPROVAL TRAVEL REQUEST FORM**

NPS Student \_\_\_\_\_

Nonpublic School \_\_\_\_\_

Name of person submitting claim: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Person(s) Traveling: \_\_\_\_\_

Beginning Date of Travel: \_\_\_\_\_

Ending Date of Travel: \_\_\_\_\_

<b>EXPENDITURE REQUEST</b>	<b>DAY 1</b>	<b>DAY 2</b>	<b>DAY 3</b>
<b>Transportation</b> (Air, Car Rental, Shuttle, Taxi Rate)	<b>DATE:</b>	<b>DATE:</b>	<b>DATE:</b>
Type:	\$	\$	\$
Type:	\$	\$	\$
Type:	\$	\$	\$
Type:	\$	\$	\$
<b>STANDARD HOTEL RATE</b>	\$	\$	\$
<b>ADULT DAILY MEAL ALLOWANCE REQUESTED</b>			
Limits per adult per day:			
Breakfast - \$	B: \$	B: \$	B: \$
Lunch - \$	L: \$	L: \$	L: \$
Dinner - \$	D: \$	D: \$	D: \$
<b>Total</b>		<b>Total</b>	<b>Total</b>
<b>RELATED EXPENSES REQUESTED</b>			
<b>Item:</b>	\$	\$	\$
<b>Item:</b>	\$	\$	\$
<b>Item:</b>	\$	\$	\$

**EXHIBIT A**

**YOLO COUNTY SPECIAL EDUCATION LOCAL PLAN AREA (SELPA)  
DISTRICT OUT OF COUNTY TRAVEL REQUEST APPROVAL FORM  
(Continued)**

- **Keep copies for your files**
  
  - **Signature of Person Submitting Request and Date**
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OFFICE USE ONLY: Trip # 1 2 3 4 [Circle One]

Date:

Signature of \_\_\_\_\_  
for Approval

**EXHIBIT B**

**YOLO COUNTY SPECIAL EDUCATION LOCAL PLAN AREA (SELPA)**  
**DISTRICT TRAVEL REIMBURSEMENT CLAIM FORM**

NPS Student \_\_\_\_\_

Nonpublic School \_\_\_\_\_

Name of person submitting claim: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Person(s) Traveling: \_\_\_\_\_

Beginning Date of Travel: \_\_\_\_\_

Ending Date of Travel: \_\_\_\_\_

<b>EXPENDITURE CLAIM</b>	<b>DAY 1</b>	<b>DAY 2</b>	<b>DAY 3</b>
<b>Transportation</b> (Air, Car Rental, Shuttle, Taxi Rate)	<b>DATE:</b>	<b>DATE:</b>	<b>DATE:</b>
Type:	\$	\$	\$
Type:	\$	\$	\$
Type:	\$	\$	\$
Type:	\$	\$	\$
<b>STANDARD HOTEL RATE</b>	\$	\$	\$
<b>ADULT DAILY MEAL ALLOWANCE</b>			
Limits per adult per day:			
Breakfast - \$	B: \$	B: \$	B: \$
Lunch - \$	L: \$	L: \$	L: \$
Dinner - \$	D: \$	D: \$	D: \$
<b>Total</b>	<b>Total</b>	<b>Total</b>	<b>Total</b>
<b>RELATED EXPENSES</b>			
<b>Item:</b>	\$	\$	\$
<b>Item:</b>	\$	\$	\$
<b>Item:</b>	\$	\$	\$

**EXHIBIT B**

**YOLO COUNTY SPECIAL EDUCATION LOCAL PLAN AREA (SELPA)**  
**DISTRICT TRAVEL REIMBURSEMENT CLAIM FORM (Continued)**

- **Please include original itemized documentation**
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- **Keep copies for your files**
  
- **Signature of Person Submitting Claim Date**

\_\_\_\_\_

OFFICE USE ONLY: Trip # 1 2 3 4 [Circle One] Date:  Signature of _____ for Approval
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Dear Parent/Guardian:

Your child with special needs will soon be enrolled in a residential nonpublic school outside of Yolo County SELPA. Your travel associated with the initial placement, subsequent therapeutic visits by you to meet with his/her therapist, or the therapeutic visits home, may be reimbursable by your district of residence. The reimbursement of up to four (4) trips per fiscal year (July 1 – June 30) is provided when prior approval is obtained, procedures are followed, documentation requirements are met, and approval is given by the Special Education Director.

To assist you in meeting the requirements for the reimbursement of appropriate travel expenses, the following forms are attached:

1. Prior Approval Travel Request Form (Exhibit A)
2. Travel Reimbursement Claim Form (Exhibit B)

Please review the guidelines and make four (4) copies of the claim form. Complete a claim form for each trip taken and submit it together with the appropriate itemized original receipts. Make a copy of the receipts and documents you will submit and keep copies for your records.

Submit claims to:

Division of Special Education

\_\_\_\_\_ District

(Address)\_\_\_\_\_

If you have any questions regarding travel reimbursement procedures or the required documentation, please contact (\_\_\_\_\_ at \_\_\_\_\_) who is assigned as your child's case manager.

This letter is to be considered as prior written notification to parents of the guidelines and requirements associated with district travel reimbursement for out of county residential non-public school students placements.