

LOSFA EXPENDITURE PRE-APPROVAL FORM

Funding Source Requested _____ Number of students projected _____
Request Date _____ Number of teachers projected _____
Proposed Date of Purchase _____ Number of volunteers projected _____
School District _____ Number of parents projected _____
School Name _____ Total Number of people projected _____
OSSC or Explorers' Club Sponsor Name _____

Grade Levels 6th 7th 8th 9th 10th 11th 12th

Vendor Name _____ Preliminary Expenditure Amount \$ _____
Vendor Name _____ Preliminary Expenditure Amount \$ _____
Vendor Name _____ Preliminary Expenditure Amount \$ _____
Vendor Name _____ Preliminary Expenditure Amount \$ _____

Expenditure Types (Select All That Apply) Total of All Expenditures \$ _____

Fee(s) Transportation Meals/Snacks Materials/Supplies Incentive Substitutes Other

Choose Initiative _____

LOSFA FIELD TRIP APPROVAL (IF APPLICABLE)

Select all that apply:

Campus Visit Business/Industry Visit College/Career Fair Visit LFOS Event Visit

LFOS (state funded) programs may only travel within the State of Louisiana

Destination _____

Event/Field Trip Leader and Title _____ Date of Trip _____

Destination Contact Person _____

Destination Contact Person's Phone Number _____

Student Selection Criteria _____

- By signing below I understand that this expenditure request is not fully authorized until signed by both the LOSFA Field Outreach Director and the LOSFA Field Outreach Personnel for the school requesting this expenditure.
- By signing below I certify that there are no additional funding sources available to support the items requested in this request. I understand that supplanting funds already in place is strictly prohibited.
- By signing below I certify that I will request reimbursement of travel expenses using PPM-49 guidelines or my school district's travel guidelines, whichever is lowest.

Deliverables for this initiative will be delivered to LOSFA on or before: ____ / ____ / ____

Please indicate the individual(s) who will collect and submit deliverables for this initiative: _____

OSSC or Explorers' Club Sponsor Signature _____ Date _____

Principal Signature _____ Date _____

District Representative Signature _____ Date _____

LOSFA Personnel Signature _____ Date _____

LOSFA Fiscal Signature _____ Date _____

LOSFA Field Outreach Director Signature _____ Date _____