## **Rider University** College of Education and Human Services

## **EXPENDITURES FOR SUPERVISION OF STUDENT TEACHERS**

SUPERVISOR'S NAME				ROM DATE	TO DATE
DATE	DESTINATION(S)	TOTAL NO. OF MILES	COST \$ PER MILE	TOLLS	TOTAL COST
			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
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			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
			.655		
	TOTALS				
				1	1

Supervisor's Signature	Date
Approval Signature: Erica Spence-Umstead, Director of Field Placement	 Date

## NOTES:

- 1. Column totals are required for processing. Purchases of Instructional Supplies are an exception and must be pre-approved by the Director of Field
- Complete the "Request for Check" form and list the total for each expense subcode (travel, meals, instructional supplies), respectively.
  Attach a copy of this form and any (original) receipts to the "Request for Check" form and return them to:
   Rider University, Office of Field Placement, Bierenbaum Fisher Halll 116, 2083 Lawrenceville Rd., Lawrenceville, NJ 08648
  Your check will be mailed to the address you provide on the "Request for Check" form.
- 5. Please retain one copy of this form, one copy of your receipts and one copy of the "Request for Check" form for your records/reference.