



TRANSPORTATION AND SUBSTITUTE TEACHER REIMBURSEMENT FORM

Crystal Bridges is thankful for the generosity of the Willard and Pat Walker Charitable Foundation, which makes school visits possible without the barriers of cost associated with transportation and substitute teachers. This program provides reimbursement to your school for the cost of transportation and substitutes.

Calculating your Reimbursement Amount

Your reimbursement amount can be calculated two different ways. The first is \$250 dollars per class attending the field trip. The second is by multiplying your round trip mileage by \$3.93. If your reimbursement amount will exceed \$250.00 per class, please submit an estimate for preapproval a minimum of 14 days prior to your visit to school.programs@crystalbridges.org.

Instructions:

- 1. Arrange Transportation:** Please arrange transportation to the Museum from your school. The Museum will reimburse a school directly for the cost of bringing students to and from the Museum. Please note: The Museum reimburses based on the amount charged by the transportation company or district.
- 2. Engage a Substitute Teacher:** If a substitute teacher is needed to cover the educators' other classes during the school visit, the Museum will reimburse the cost of one substitute per educator.
- 3. Send an Estimate:** If your reimbursement amount will exceed \$250.00 per class please submit an estimate a minimum of 14 days prior to your visit to school.programs@crystalbridges.org or sarah.foster@crystalbridges.org.
- 4. Complete this Form:** Reimbursement requests must be submitted to the Museum within 30 days of your tour. Reimbursements will be paid within 30 days of receipt of this form and required documentation.

5. Required Documentation:

- For Transportation: A copy of the invoice from your district, an invoice from the transportation company, gas receipts or a letter on school letterhead outlining the costs.
- For a Substitute Teacher: An invoice from the school or a letter on school letterhead.

5. Submit Form and Documentation to Crystal Bridges:

Either email or mail the completed form to: school.programs@crystalbridges.org

Crystal Bridges Museum of American Art

Attn: School Programs Coordinator

600 Museum Way

Bentonville, AR 72712



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CONTACT NAME AND PHONE NUMBER	TOUR DATE
TOTAL BUS EXPENSE Documentation Attached? <input type="checkbox"/>	TOTAL SUBSTITUTE TEACHER EXPENSE Documentation Attached? <input type="checkbox"/>
\$ _____.	\$ _____.
CHECK PAYABLE TO (NAME OF SCHOOL)	
ADDRESS TO REMIT PAYMENT	
FOR CRYSTAL BRIDGES OFFICE USE ONLY	
District Name _____ Walker-School Visit Program, Trip Reimbursment Total Number of Classes _____ Total Bus Expense (340-6730-000060) \$ _____ Total Teacher Expense (340-6740-000060) \$ _____	Reservation# _____ Received _____ Amount _____ Sent _____
APPROVAL	
Department Manager _____ Division Director _____	



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