

Travel Policy Acknowledgment and Agreement Form

Employee Name: _____

Employee ID: _____

I hereby acknowledge that I have been informed that the [Lee College Travel Policy](#) (and future updated versions) is available to me via the Lee College Human Resources website. I understand that it is my responsibility to read and abide by the standards, policies, and procedures defined or referenced in this document.

The Travel Policy is subject to change. I understand that changes in District policies may supersede, modify, or eliminate the information summarized in the document. As the District provides updated policy information, I accept responsibility for reading and abiding by the changes. I also understand that the District reserves the right to interpret the provisions of the policy.

I accept responsibility for contacting my supervisor or the Purchasing Department if I have questions, concerns, or need further explanation.

I hereby acknowledge that I have read the Lee College Travel Policy. I understand and agree to abide by the terms listed below:

- If I owe money to Lee College after submitting an expense report, the amount owed may be submitted for payroll deduction if not paid to the College within fifteen (15) days of formal notification by the Business Office.
- Accrued expenses from a business trip may be submitted for payroll deduction if an expense report is not reported to the College within thirty (30) days of the business trip.

Employee Signature: _____

Date: _____