

Spring Independent School District

Travel Reservations Request Form - User Guide

Single Person Reservation

Group Reservation

Budget Unit and Account Code (Secretary Only)

How to approve the Form

How to Submit a Travel Reservations Request Form

Spring ISD employees can request travel reservations by following the steps below, the Laserfiche process routes the form automatically to the corresponding approvers.

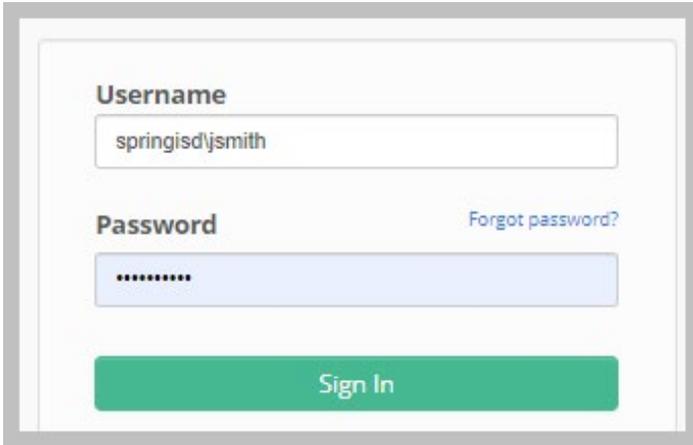
Admin staff members.

Click this link <https://forms.springisd.org/forms> and enter your Laserfiche credentials.

Example of credentials:

username: springisd\jsmith (that's a backslash \, the key above the Enter key)

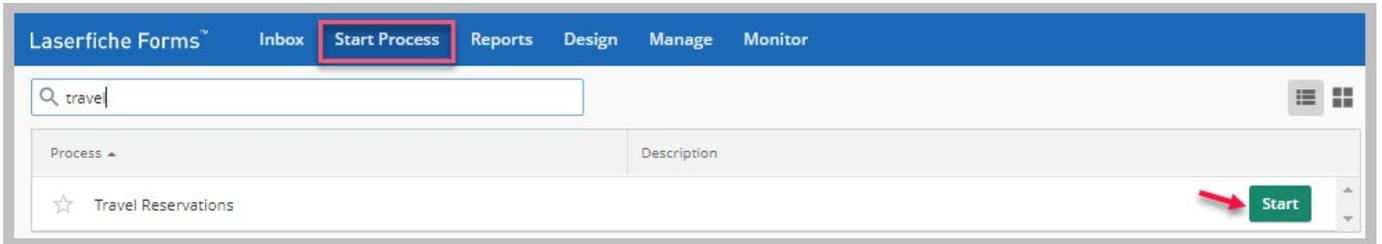
password: (same as your network password)



A screenshot of a login form with the following elements:

- Username:** A text input field containing the text "springisd\jsmith".
- Password:** A password input field with masked characters (dots). To the right of the field is a link that says "Forgot password?".
- Sign In:** A large green button with the text "Sign In" centered on it.

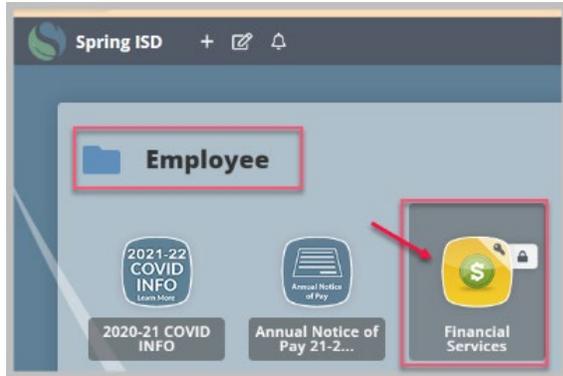
Click the **Start** button



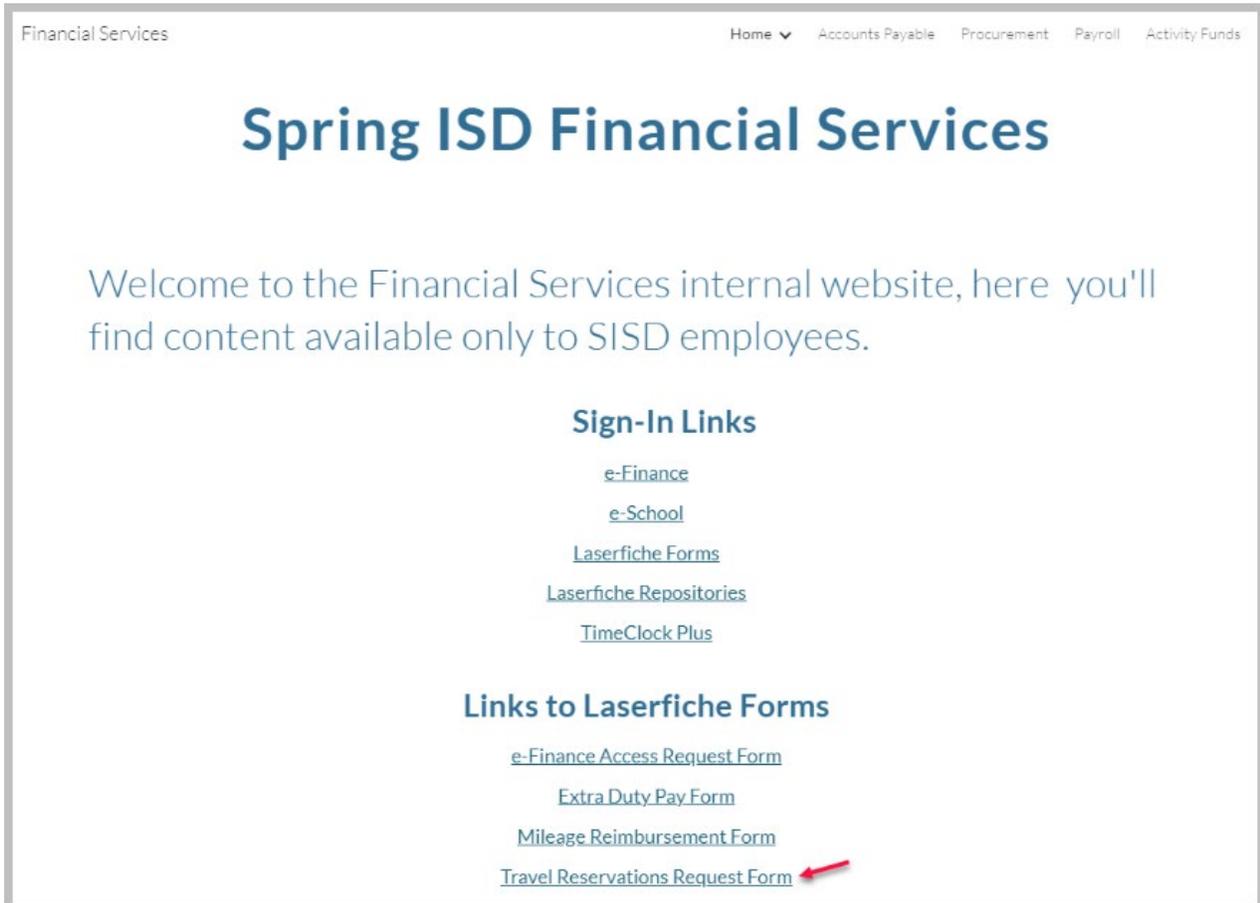
A screenshot of the Laserfiche Forms web application interface. The top navigation bar is blue and contains the following items: "Laserfiche Forms™", "Inbox", "Start Process" (highlighted with a red box), "Reports", "Design", "Manage", and "Monitor". Below the navigation bar is a search bar containing the text "travel". Underneath the search bar is a table with two columns: "Process" and "Description". The table contains one row with a star icon, the text "Travel Reservations", and a green "Start" button with a red arrow pointing to it.

Teachers and other staff members.

Click [here](#) or go to the SISD portal (my.springisd.org) **Employee** folder > **Financial Services** >



Click the link to the **Travel Reservations Request Form**



Single Person Reservation



Spring Independent School District

Travel Reservations Form | Desk e-mail: travel@springisd.org

1 Type of Reservation*

Single Person Group

2 Are you submitting this form on behalf of someone else?*

Yes No

3 Flight-Hotel-Car*

Flight Hotel Car

4 EVENT INFORMATION

Event Date*	Time	City*	State*	Name of Event*	Link to the Event Information (URL)*
2/6/2023	08:00 AM	Dallas	TX	TASA/TASB	www.tasa.tasb.org/conference

OR

Event Information (PDF)

5 TRAVELING EMPLOYEE (SINGLE RESERVATION)

Employee ID*	First Name	Last Name	Campus/Department	Position	Home_Org
	GERARDO	ROCHIN	ADMIN-PROCUREMENT	MANAGER-RECORDS	90V

Birthdate*	Cell Phone Number*	Gender*	Employee Email	Signature
	281-891-6482	<input type="radio"/> Female <input checked="" type="radio"/> Male	GERARDOR@springisd.org	

6 DEPARTMENT APPROVAL ROUTING

Supervisor*	Secretary Name	Dept Head Name
PHILLIP ELLISON	Rosa Martinez	Phillip Ellison

7 FLIGHT (DESTINATION)

- Airline tickets will be reserved in the name of the person(s) listed above. Tickets cannot be transferred to another person.
- Any changes/cancellations MUST be submitted on the Change/Cancellation Form and signed by traveler, supervisor, and Cabinet. If approval is not granted by Cabinet, traveler is personally liable for all travel related charges. Changes will increase the cost of the ticket by \$200.

Flight Date*	Departing City*	Airport	Destination City & State*	Airport	Earliest Departure Time*	Desired Arvl Time
2/5/2023	Houston	IAH	Dallas Fort Worth	DFW	02:00 PM	06:00 PM

Seat Pref (aisle or window may incur an extra charge)*

Aisle Window NoPref

8 FLIGHT (RETURN)

Flight Date*	Departing City*	Airport	Destination City & State*	Airport	Earliest Departure Time*	Desired Arrival Time
2/8/2023	Dallas Fort Worth	DFW	Houston, TX	IAH	01:00 PM	5:00 PM

Seat Pref (aisle or window may incur an extra charge)*

Aisle Window NoPref

9 HOTEL RESERVATION

Room Reservations will be Guaranteed Only. Staff members must pay for the room.

Number of Rooms Needed*	Code	Date In*	Date Out*	City*	Hotel Preference	Hotel Telephone #
1	TASA2023	2/5/2023	2/8/2023	Dallas	Crown Plaza Dallas	214-742-5678

(When appropriate staff will share rooms) (If hotel has special conference rate)

10 CAR RENTAL RESERVATION

- SISD carries auto insurance; do not sign for additional insurance coverage when renting the car.
- Payment for rental must be paid for by staff member at time of vehicle drop off.
- Driver must have valid driver's license and major credit card.

Number of People*	Type of Vehicle*
3	<input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Other

FINANCIAL SERVICES

Fill out the form as indicated below.

- 1 Type of Reservation.-** Select the Single Person radio button.

Type of Reservation *

Single Person Group

- 2 Are you submitting this form on behalf of someone else?** Answer Yes or No.

- 3 Flight-Hotel-Car.-** Check the corresponding box(es).

Flight-Hotel-Car *

Flight Hotel Car

- 4 EVENT INFORMATION.-** Enter the requested information.

EVENT INFORMATION

Event Date * Time City * State * Name of Event * Link to the Event Information (URL) *

OR

Event Information (PDF)

- 5 TRAVELING EMPLOYEE (SINGLE RESERVATION).-** Enter the employee ID and press the **Tab** key, the fields of the first line are auto-populated. Enter the fields of the second line.

TRAVELING EMPLOYEE (SINGLE RESERVATION)

Employee ID * First Name Last Name Campus/Department Position Home_Org

Birthdate * Cell Phone Number * Gender * Employee Email Signature *

 Female Male

- 6 DEPARTMENT APPROVAL ROUTING**

Click the Supervisor drop-down field and select the corresponding supervisor, the following fields are auto-populated.

DEPARTMENT APPROVAL ROUTING

Supervisor * Secretary Name Dept Head Name

Select the Supervisor

- 7 FLIGHT (DESTINATION).-**

FLIGHT (DESTINATION)

o Airline tickets will be reserved in the name of the person(s) listed above. Tickets cannot be transferred to another person.
o Any changes/cancellations MUST be submitted on the Change/Cancellation Form and signed by traveler, supervisor, and Cabinet. If approval is not granted by Cabinet, traveler is personally liable for all travel related charges. Changes will increase the cost of the ticket by \$200.

Flight Date * Departing City * Airport Destination City & State * Airport Earliest Departure Time * Desired Arvl Time

Seat Pref (aisle or window may incur an extra charge) *

Aisle Window NoPref

FINANCIAL SERVICES

8 FLIGHT (RETURN). Enter the requested information.

FLIGHT (RETURN)

Flight Date* Departing City* Airport Destination City & State* Airport Earliest Departure Time* Desired Arrival Time

Seat Pref (aisle or window may incur an extra charge)*

Aisle Window NoPref

9 HOTEL RESERVATION.- Enter the requested information.

HOTEL RESERVATION

Room Reservations will be Guaranteed Only. Staff members must pay for the room.

Number of Rooms Needed* Code Date In* Date Out* City* Hotel Preference Hotel Telephone #

(When appropriate staff will share rooms) (If hotel has special conference rate)

10 CAR RENTAL RESERVATION.- Enter the requested information.

CAR RENTAL RESERVATION

- o SISK carries auto insurance; do not sign for additional insurance coverage when renting the car.
- o Payment for rental must be paid for by staff member at time of vehicle drop off.
- o Driver must have valid driver's license and major credit card.

Number of People* Type of Vehicle*

 Car Van Other

11 SUBMIT THE FORM.- Click the Submit button

INSTRUCTIONS

SISK TRAVEL RESERVATION REQUEST FORM INSTRUCTIONS.

Request for SISK Travel Reservations forms are processed through the Travel Coordinator located in the Procurement Services Dept. at the Administration Building. Travel@springisd.org is the contact account for flight, hotel and rental car reservations.

- Request for SISK Travel Reservations online form can be located on the SISK Website listed under Travel.
- A valid budget unit and account code should be entered.
- E ticket will be emailed to requestor. Airlines allow 24 hours for a customer to verify dates and notify them of any changes before they charge additional fees for modifications. Review reservation and notify travel coordinator immediately of any incorrect information. Otherwise you may incur additional charges after this 24 hour period.
- Flights are non-transferable and non-refundable and require a \$200 rebooking fee to change a flight. The ticket will valid for 1 year from the date of purchase with \$200.00 rebooking fee plus the difference in the price of ticket.
- Seating arrangements requiring additional fees must be approved by Budget Manager/Supervisor.
- SISK will pay for the first checked bag each way. Any additional baggage will be the responsibility of the staff member traveling.
- Hotel reservation confirmations will be emailed to the requestor. Verify and confirm dates are correct. Review hotel policies regarding cancellation fees.
- Hotels require a personal credit card upon check in for incidentals.
- Travel plans should be initiated 30 days in advance of trip to allow for better rates and schedules.
- Hotel reservations for conferences and workshops should be reserved at time registration information becomes available in order to get the conference room rate. District credit card will be used to guarantee the room only. Staff members are responsible for full payment at check out.

GROUP TRAVEL

Groups with over ten travelers may make air, hotel, and ground transportation arrangements through the District's contracted vendors for Group Travel. Please refer to the District's Contract Reporter system to identify the authorized vendors for Group Travel and their respective contact information. Contract Reporter is located on the Spring ISD website under Departments, Procurement Services, Purchasing and Contracts. Contract Reporter (lower right side).

HELP/TRAINING

Email Travel Coordinator at travel@springisd.org with specific questions and/or requests.

12 Upon submission you will receive an acknowledgement email notification. A second email will be sent with the reservation(s) information once complete.

Thank you!

Your form has been submitted.

Group Reservation



Spring Independent School District
Travel Reservations Form | Desk e-mail: travel@springisd.org

1 Type of Reservation *

Single Person Group

2 Flight-Hotel-Car *

Flight Hotel Car

3 EVENT INFORMATION

Event Date *	Time	City *	State *	Name of Event *	Link to the Event Information (URL) *
2/6/2023	08:00 AM	Dallas	TX	TASA/TASB	www.tasa.tasb.org/conference

OR

Event Information (PDF)
Upload

4 BUDGET AND APPROVER INFORMATION

Budget Unit *	Acct Code *	Budget Approver *
1993417002995	6419.TO	Phillip Ellison

5 GROUP RESERVATION

Emp ID *	First Name	Last Name	Campus-Dept	Position	Gender * DOB *	Cell Phone *
	GERARDO	ROCHIN	ADMIN-PROCUREMENT	MANAGER-RECORDS	<input type="radio"/> F <input type="radio"/> M	
	ROSA	MARTINEZ	ADMIN-PROCUREMENT	SECRETARY-EXEC DIR	<input type="radio"/> F <input type="radio"/> M	
					<input type="radio"/> F <input type="radio"/> M	
					<input type="radio"/> F <input type="radio"/> M	

[Add Another Person](#)

[Link to Supervisor Signature Form \(download form, collect signatures and upload in next field\)](#)

Tip: Click the Save as Draft button to upload the Supervisor Signature Form at a later time.

Traveler and Supervisor Signatures

Form *

Upload

Supervisor Signature F... 109.8KB X

6 FLIGHT (DESTINATION)

- Airline tickets will be reserved in the name of the person(s) listed above. Tickets cannot be transferred to another person.
- Any changes/cancellations MUST be submitted on the Change/Cancellation Form and signed by traveler, supervisor, and Cabinet. If approval is not granted by Cabinet, traveler is personally liable for all travel related charges. Changes will increase the cost of the ticket by \$200.

Flight Date *	Departing City *	Airport	Destination City & State *	Airport	Earliest Departure Time *	Desired Arvl Time
2/5/2023	Houston	TX	Dallas, TX	DFW	2:00 PM	6:00 PM

Seat Pref (aisle or window may incur an extra charge) *

Aisle Window NoPref

7 FLIGHT (RETURN)

Flight Date *	Departing City *	Airport	Destination City & State *	Airport	Earliest Departure Time *	Desired Arrival Time
2/8/2023	Dallas	DFW	Houston, TX	IAH	1:00 PM	5:00 PM

Seat Pref (aisle or window may incur an extra charge) *

Aisle Window NoPref

8 HOTEL RESERVATION

Room Reservations will be Guaranteed Only. Staff members must pay for the room.

Number of Rooms Needed *	Code	Date In *	Date Out *	City *	Hotel Preference	Hotel Telephone #
4	TASA2023	2/5/2023	2/8/2023	Dallas	Crown Plaza Dallas	214-742-5678

(When appropriate staff will share rooms) (If hotel has special conference rate)

9 CAR RENTAL RESERVATION

- SISD carries auto insurance; do not sign for additional insurance coverage when renting the car.
- Payment for rental must be paid for by staff member at time of vehicle drop off.
- Driver must have valid driver's license and major credit card.

Number of People *	Type of Vehicle *
4	<input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Other

10 SUBMITTER INFORMATION & SIGNATURE

Employee ID *	Submitter First Name	Submitter Last Name	Submitter Dept-Campus	Submitter Position	Signature *
	GERARDO	ROCHIN	ADMIN-PROCUREMENT	MANAGER-RECORDS	Sign

FINANCIAL SERVICES

Fill out the form as indicated below.

1 Type of Reservation.- Select the Group radio button.

2 Flight-Hotel-Car.- Check the corresponding box(es).

3 EVENT INFORMATION.- Enter the requested information.

4 BUDGET AND APPROVER INFORMATION.- Enter the budget unit, account code, select the budget approver from the drop-down list, and upload the **signed** Traveler and Supervisor Signatures Form (click the link in order to download the form)

5 GROUP RESERVATION.-

- Enter the employee ID and press the **Tab** key (the next four fields auto-populate), enter the other required information. Click [Add Another Person](#) to add more lines as needed.
- Upload the **signed** Traveler and Supervisor Signatures Form (click the link to the form in order to download the form if needed).

6 FLIGHT (DESTINATION).-

FLIGHT (DESTINATION)

- o Airline tickets will be reserved in the name of the person(s) listed above. Tickets cannot be transferred to another person.
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Flight Date* Departing City* Airport Destination City & State* Airport Earliest Departure Time* Desired Arvl Time

Seat Pref (aisle or window may incur an extra charge)*

Aisle Window NoPref

7 FLIGHT (RETURN). Enter the requested information.

FLIGHT (RETURN)

Flight Date* Departing City* Airport Destination City & State* Airport Earliest Departure Time* Desired Arrival Time

Seat Pref (aisle or window may incur an extra charge)*

Aisle Window NoPref

8 HOTEL RESERVATION.- Enter the requested information.

HOTEL RESERVATION

Room Reservations will be Guaranteed Only. Staff members must pay for the room.

Number of Rooms Needed* Code Date In* Date Out* City* Hotel Preference Hotel Telephone #

(When appropriate staff will share rooms) (if hotel has special conference rate)

9 CAR RENTAL RESERVATION.- Enter the requested information.

CAR RENTAL RESERVATION

- o SISD carries auto insurance; do not sign for additional insurance coverage when renting the car.
- o Payment for rental must be paid for by staff member at time of vehicle drop off.
- o Driver must have valid driver's license and major credit card.

Number of People* Type of Vehicle*

Car Van Other

10 SUBMITTER FORMATION.- Enter your employee ID and signature (the rest of the information is auto-populated)

SUBMITTER INFORMATION & SIGNATURE

Employee ID *	Submitter First Name	Submitter Last Name	Submitter Dept-Campus	Submitter Position		Signature *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text" value="Sign"/>

11 SUBMIT THE FORM.- Click the Submit button

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- Flights are non-transferable and non-refundable and require a \$200 rebooking fee to change a flight. The ticket will valid for 1 year from the date of purchase with \$200.00 rebooking fee plus the difference in the price of ticket.
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- SISD will pay for the first checked bag each way. Any additional baggage will be the responsibility of the staff member traveling.
- Hotel reservation confirmations will be emailed to the requestor. Verify and confirm dates are correct. Review hotel policies regarding cancellation fees.
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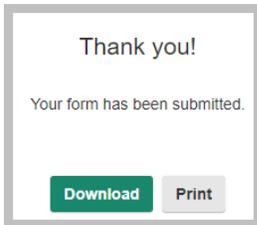
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HELP/TRAINING

Email Travel Coordinator at travel@springisd.org with specific questions and/or requests.

12 Upon submission you will receive an acknowledgement email notification. A second email will be sent with the reservation(s) information once complete.



Budget Unit and Account Code (Secretary Only)

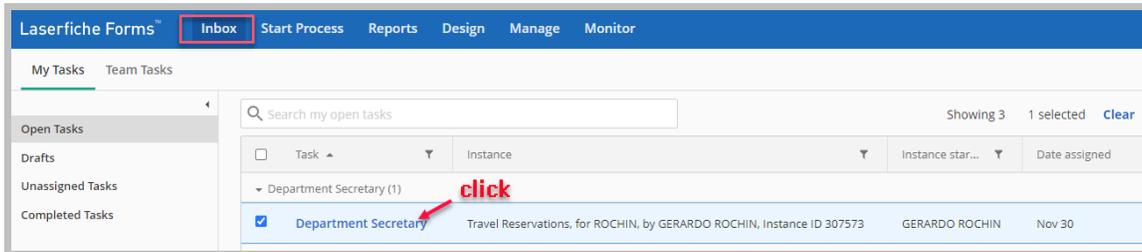
Department or school secretaries will receive an email notification upon submission of a single-person travel reservation form. Open the form by clicking the link in the email or go to your Laserfiche Inbox:

(<https://forms.springisd.org/forms>)

Reminder: example of Laserfiche credentials:

username: springisd\jsmith (that's a backslash \, the key above the Enter key); password: (same as your network password)

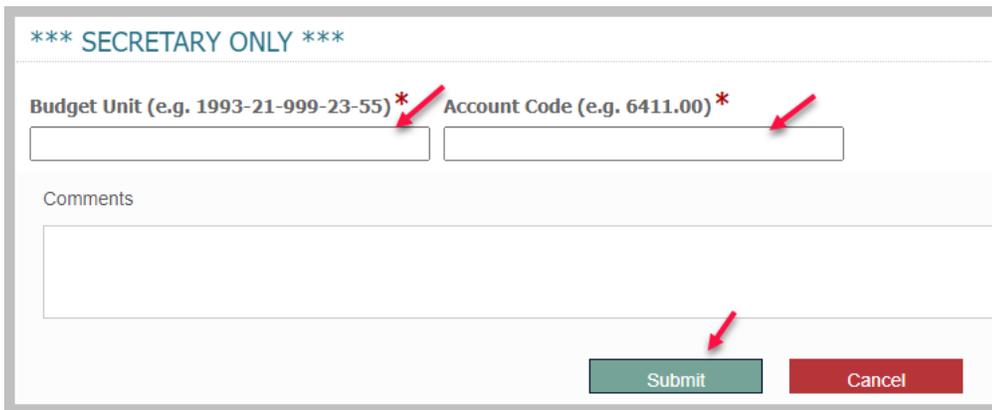
Click the link in order to open the form.



The screenshot shows the 'Laserfiche Forms' interface. The 'Inbox' tab is selected. A table of tasks is displayed with the following columns: Task, Instance, Instance star..., and Date assigned. A task is selected, and a red arrow points to the 'Department Secretary' name in the 'Task' column, with the word 'click' written in red next to it.

Task	Instance	Instance star...	Date assigned
Department Secretary (1)			
<input checked="" type="checkbox"/> Department Secretary	Travel Reservations, for ROCHIN, by GERARDO ROCHIN, Instance ID 307573	GERARDO ROCHIN	Nov 30

Scroll down to the Secretary Only section, enter the budget unit and account code, click Submit.



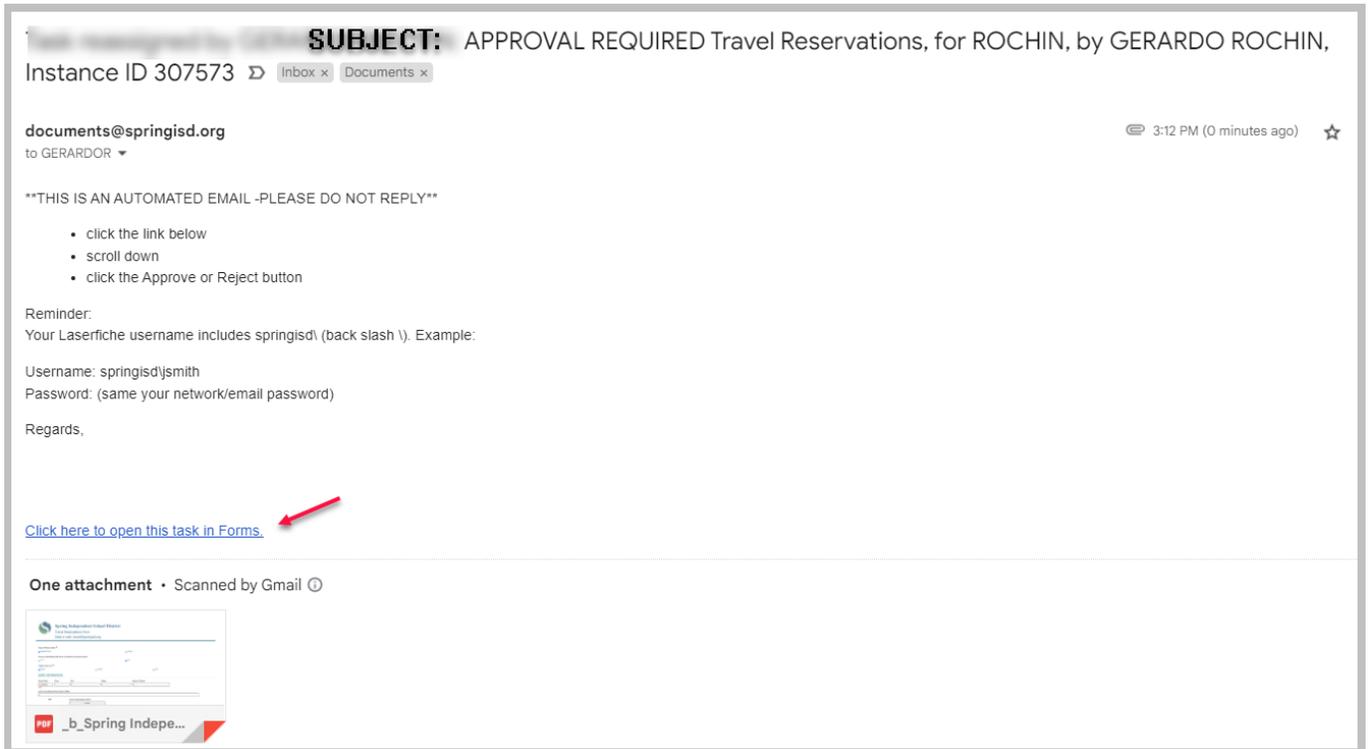
The screenshot shows the 'SECRETARY ONLY' section of the form. It contains two input fields: 'Budget Unit (e.g. 1993-21-999-23-55)*' and 'Account Code (e.g. 6411.00)*'. Red arrows point to both fields. Below these fields is a 'Comments' section with a text area. At the bottom right, there are two buttons: 'Submit' (green) and 'Cancel' (red). A red arrow points to the 'Submit' button.

The form will route to the department head or principal for approval, they will receive an email notification.

How to approve the Form

Approvers (department heads/supervisor and principals) of the Travel Reservations forms will be notified via email automatically by documents@springisd.org when their approval is required. The approval flow is in sequential order.

Click the link in the email in order to open the form.



Scroll down and click the Approve or Reject button accordingly.



If approved, the form will route to the travel specialist.

If denied, the submitter will receive an email notification informing her/him about denial and the process will terminate.