**Reading Recovery Travel Application**

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| Important information   1. This application needs to be completed by the Reading Recovery teacher and tutor. It then needs to be approved and signed by the principal. The teacher must then confirm they have received payment before submitting this application. 2. The base school are responsible for paying any authorised claims to the Reading Recovery teacher which they can then claim back using this application form. 3. Verification of the Reading Recovery teacher’s absence and days when Reading Recovery travel is not incurred may be requested by the Ministry. 4. Reading Recovery teachers are responsible for their own travel costs to the school where they commence their teaching from and the school they finish their teaching, unless formally approved by two or more schools. 5. The Ministry does not reimburse teachers for their training travel. 6. The final date for processing claims for each school term will be the end of the following term, e.g. travel during term 1 must be claimed by the end of term 2. | | | | | | | |
| School information | | | | | | | |
| Employing school’s name |  | | | School no. | | |  |
| School 1 |  | | | | | | |
| School 2 |  | | | | | | |
| School 3 |  | | | | | | |
| School 4 |  | | | | | | |
| **Reading Recovery teacher’s details** | | | | | | | |
| Teacher’s name |  | MOE no. | | |  | | |
| Term claimed for: |  | Year | | |  | | |
| Daily travel details for this term  Please note school 1 is your first teaching school of the day | | | | | | | |
| School 1 |  | | Distance (km) | | |  | |
| School 2 |  | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| School 2 | |  | | | | | Distance (km) |  |
| School 3 | |  | | | | |
| School 3 | |  | | | | | Distance (km) |  |
| School 4 | |  | | | | |
| Week | **Dates** | **Monday** | | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Total distance (km)** |
| 1 |  |  | |  |  |  |  |  |
| 2 |  |  | |  |  |  |  |  |
| 3 |  |  | |  |  |  |  |  |
| 4 |  |  | |  |  |  |  |  |
| 5 |  |  | |  |  |  |  |  |
| 6 |  |  | |  |  |  |  |  |
| 7 |  |  | |  |  |  |  |  |
| 8 |  |  | |  |  |  |  |  |
| 9 |  |  | |  |  |  |  |  |
| 10 |  |  | |  |  |  |  |  |
| 11 |  |  | |  |  |  |  |  |
| Total distance (km) travelled during the term | | | | | | | |  |
| Total actual days travelled (not including absences, public holidays, non-travel days) | | | | | | | |  |
| Reimbursement calculation | | | | | | | | |
|  | | | | | | | | |
| Reimbursement | | | $ | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Certification  I certify that the information contained in this claim is true and correct in every particular. | | | | | |
| Reading Recovery teacher | | Signature |  | Date | |
| *I confirm that I have received the following from the base school:* | | | | | |
| Amount | $ | Term |  | Year |  |
| Reading Recovery tutor | | Signature |  | Date |  |
| Principal of employing school | | Signature |  | Date |  |