To All Faculty:

Faculty Travel to a Non-Home Campus

November 19, 2011; DUE December 19, 2012

INTRODUCTION:

CSU East Bay has recently settled a Chapter grievance with the CFA regarding travel by faculty to other locations. There are two parts to this settlement. Please read both parts.

Part I—Travel for the period Fall 2011-Fall 2012

- To whom does this faculty travel reimbursement apply? To all regular and temporary faculty employed by CSU East Bay in Fall 2011-Fall 2012 who have not already been reimbursed for travel to and from a second campus or site. (i.e. who travelled to Concord to teach, if the majority of their work was done in Hayward)
- 2. How do I get reimbursed?
 - A. For travel completed in Fall 2011, Winter 2012, Spring 2012, Summer 2012, and/or Fall 2012 please file a travel expense claim form within 30 days of this notice. The travel expense claim form is available at: www20.csueastbay.edu/af/departments/finance/procurement/accounts-payable/travel/forms/
 - B. The form(s) may be sent electronically or in paper format to your Associate Dean. The Associate Deans are:
 - Alan.monat@csueastbay.edu (Science)
 - Xinjian.Lu@csueastbay.edu (Business)
 - James.zarrillo@csueastbay.edu (Education)
 - Rafael.hernandez@csueastbay.edu (CLASS)
 - C. Reimbursement is at \$.50 per mile. You need to put your license plate number on the form.
 - D. Forms are due to the Associate Deans by December 19, 2012
- 3. How do I determine my mileage?

Step A. Determine where the majority of your work was performed for that quarter. That is your home campus. If your home campus is: -Hayward, you may be reimbursed for travel to and from Concord or Oakland or another site -Concord, you may be reimbursed

for travel to and from Hayward or Oakland or another site -If you taught 2 courses, one at Hayward and one at Concord. One will be reimbursable.

Step B. Print out a MapQuest or other computer generated calculation of the mileage from your home to the non-home campus.

Step C. You are entitled to mileage based on your starting point: See chart in Attachment A.

Step D. Please fill in a travel reimbursement form for each quarter, attach the MapQuest (or other) mileage documentation and submit the form(s) to your Associate Dean. This may be done by email. mail, or in person.

4. Examples:

- A. A faculty member, who lives in Concord, does the majority of her work in Hayward but 2 times a week she travels to Concord campus. Can she be reimbursed? Yes. Starting at her home and going to the Concord campus is reimbursable, as is going home from the Concord campus.
- B. A faculty member does the majority of his work at Hayward. He is asked to attend a meeting once a month in Concord, is this reimbursable? Yes. He can be reimbursed for the mileage from Hayward to Concord and back or back to his/her house (whichever is less)
- C. What about travel to other sites? This is also reimbursable but must be documented.
- 5. Why are we paying at this time? What if there are other questions?
- A. This is the result of a settlement with the CFA; it is in compliance with the CSU's travel policy.
- B. Please contact the Associate Dean of your college if there are other questions.

6. Attachments:

- A. Attachment A (Note: Attachment A says it is applicable from September 19- November 6, we are applying the settlement for all of Fall Quarter; the definitions in the Chart apply to all such travel in future quarters)
- B. CSU East Bay Travel Form

Part II: For Travel to a second campus location for Winter 2013 onward

1. The same travel rules will apply BUT:

- A. You must have taken the Defensive Driving course. The course is located at https://adhayweb13.csueastbay.edu/wsapps/masterynet/
- B. You must file a form authorizing you to use a private vehicle for state business: http://www.documents.dgs.ca.gov/osp/pdf/std261.pdf
- C. You must submit your travel claim form with an ink signature in a timely manner to your department secretary on either a monthly or quarterly basis.
- 2. Note: there are no exceptions to the above on travel that is not part of the retroactive settlement (Part I); so please take care of the course, fill in the private vehicle form, and supply the reimbursement request, with a "wet" signature in a timely manner. The University will be checking your DMV record.
- 3. Please remember that you will need to put your license plate number on the reimbursement form.
- The CSU East Bay Travel Policy is located at http://www20.csueastbay.edu/af/departments/finance/procurement/accounts-payable/travel/policies/

ATTACHMENT A

November 19, 2012

To: All Faculty Unit Employees employed by CSU East Bay from September 19, 2011 to

November 6, 2012

From: Linda S. Dobb, Associate Provost

Re: Mileage reimbursement for travel to and from locations other than the home campus

Please be advised that CSU East Bay faculty unit employees who are assigned to perform work at a location other than their home campus (non-home campus), as defined by CSU Travel Procedures and Regulations (C. Automobile – 1. Allowable Mileage Expense) ("CSU TRAVEL POLICY"), which does not require an overnight stay and has not been previously reimbursed, shall be eligible for mileage reimbursement from September 19, 2011 to November 6, 2012 upon request in the following manner:

From (starting location):	To (destination):	Amount of mileage to be paid:				
Faculty unit employee's residence	Non-home campus	 Whichever is less – Mileage from faculty unit employee's residence to nonhome campus or Mileage from home campus to non-home campus 				
Non-home campus	Faculty unit employee's residence	 Whichever is less – Mileage from non-home campus to faculty unit employee's residence or Mileage from non-home campus to home campus 				
Home campus	Non-home campus	Mileage from home campus to non-home campus				
Non-home campus	Home campus	Mileage from non-home campus to home campus				
Non-home campus	Another non-home campus	Mileage from non-home campus to the other non-home campus				

Travel to and from multiple locations in a single day is reimbursable. If you believe you are owed mileage reimbursement for mileage incurred between September 19, 2011 through November 6, 2012, please submit the attached Travel Expense Claim Form to YOUR ASSOCIATE DEAN (via mail or email) within 30 days (DECEMBER 19, 2012). Note: This information does not apply to Extended Education Work.



TRAVEL EXPENSE CLAIM SUMMARY FORM															
STD. 262 (REV. 6/93) last revised 5/29/2009								Page	1	of	1 Pages				
CLAIMANT'S NAME					NET ID DEPARTMEN										
POSITION				DIVISION OR BUREAU						Email address for notification					
RESIDENCE ADDRESS					HEADQUARTERS ADDRESS						TELEPHONE NUMBER				
CITY STATE					ZIP (CODE	СПУ						STATE ZIP CODE		
1	Please indicate below how you would like to have your check handled														
Please email me when check is ready for						Please interoffice to de									
			(3)	(4)	(5)		MEALS	(6)	(7) TRANSPORTATION (D			(D) PRIVATE C	AR USE	(8)	(9)
	(2)	l	LOCATION WHERE EXPENSES WERE INCURRED				O.T., L/T, N/C, RELO. OR		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	MILES	AMOUNT	BUSINESS EXPENSES	TOTAL EXPENSES FOR DAY
LINE 1	DATE	TIME		LODGING	BREAKFAST	LUNCH	DIAMED	INCIDENTALS	COST OF TIONS.		TOLES, PARKING	_			
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(10)	PAGE SUB	TOTALS	-	-	-		-	-		-		_	-	-
CC	COLUMN CODE (ACCTG. USE ONLY)														
P	RE-P/	AID E	XPENSES												
Ad	Advances (if applicable)														
Air	Airfare Paid by University														
Enterprise Rental paid by University															
Registration paid via Procurement or check request															
Total for Prepaid Expenses					\$0.00										
TRAVEL CLAIM TOTAL (ALL PAGES)				\$0.00 LESS				\$0.00 NET REIMBURS			EIMBURSE	MENT		\$0.00	
(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required and refer to line number if appropriate)											(12) NORMA	AL WORK HOURS			
											0800-1700				
(13) PRIVATE VEHICL												E VEHICLE LICENSE	NUMBER		
Account									(14) MILEA			GE RATE CLAIMED			
	ACCO	·uiit	Fund	DeptID	Prog	gram	CI	ass	Pro	j/Grant	Amo	unt	0.500	(E	Example 0.500)
											AGENCY ACCOUNTING OFFICE USE ONLY				
(15) I HEREBY CERTIFY that the above is a true statement of the travel expenses incurred by me in accordance with business of The California State University Chancellor's Office Coded Memoranda HR 2008-10.											PAID BY REVO	OLVING FUND CHECK	NUMBER		
CLAIMANT'S SIGNATURE DATE (16) SIGNATURE OF OR				RE OF OFFICE	CER APPROVING TRAVEL AND PAYMENT DATE					E					
(17) SPECIAL	EXPENSE	AUTHORIZATION - SIGNATURE and TITLE		-								1		
For Accounting Use:				Vendor#	Vendor# Voucher#								1		