<u>**DUAL**</u> ASSIGNMENT
MILEAGE REIMBURSEMENT WORKSHEET

"Dual Assignment" is a regular assignment to more than one designated campus/center site during the employee's regular work <u>**WEEK**</u>. (Reference Article 4.9 CCFT CBA or 3.10.1-2 of CCCUE CBA)

NAME:	BANNER ID#:	SECTIONS TAUGHT:	
HOME ADDRESS:	CITY:	STATE:	ZIP:

PRIMARY DAYS & LOCATIONS:*

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
☐ SLO	☐ SLO	☐ SLO	☐ SLO	☐ SLO	☐ SLO
☐ NCC	☐ NCC	☐ NCC	☐ NCC	☐ NCC	☐ NCC
☐ AGHS	☐ AGHS	☐ AGHS	☐ AGHS	☐ AGHS	☐ AGHS
☐ NHS	☐ NHS	☐ NHS	☐ NHS	☐ NHS	☐ NHS

SECONDARY DAYS & LOCATIONS:*

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
☐ SLO	☐ SLO	☐ SLO	☐ SLO	☐ SLO	☐ SLO
☐ NCC	☐ NCC	☐ NCC	☐ NCC	☐ NCC	☐ NCC
☐ AGHS	☐ AGHS	☐ AGHS	☐ AGHS	☐ AGHS	☐ AGHS
☐ NHS	☐ NHS	☐ NHS	☐ NHS	☐ NHS	☐ NHS
☐ CMC	☐ CMC	☐ CMC	☐ CMC	☐ CMC	☐ CMC

*INCLUDE MILEAGE LOG WORKSHEET TO VERIFY DAYS AND LOCATIONS

Number of miles from home to your secondary campus and return:	______________________	(A)
Number of miles from home to your primary campus and return:	______________________	(B)
Subtract (B) from (A):	______________________	(C)
Number of days traveled to secondary campus:	______________________	(D)
Standard IRS mileage rate for the period: *current rate (0.760)*	______________________	(E)
Multiply (C) x (D) x (E) = Your Reimbursement Amount:	$_______________	

Account						
Account						

SIGNATURE OF EMPLOYEE
SIGNATURE OF ADMINISTRATOR
SIGNATURE OF BUDGET OFFICE

1. Attach supporting documents
   a) copy of map home to primary
   b) copy of map home to secondary
   c) mileage log worksheet

2. Employee signs

3. Obtain required administrator approval signature

4. Submit signed form and supporting documents to budget office for final sign off and processing. budget@cuesta.edu

FOR OFFICE USE ONLY:

Dual Assignment (Y/N): ___________ Reimbursement Rate: $__________ per mile Tenure ☐ or Tenure Track ☐

Verification of workdays reported (Y/N): ___________ Verified by: ____ Date: _____________________