



TRAVEL REQUEST FORM

Please fill out the form completely and return with chair's approval to the Dean's Office.

Date: _____

Name: _____ Email: _____

Department: _____ Phone: _____

Name of Event: _____

Location: _____

INCLUSIVE DATES OF TRAVEL:

From: _____ To: _____
Month/Day/Year Month/Day/Year

Method of Transportation: _____
If personal auto, mileage is 55.5 cents per mile.

Transportation Cost: \$ _____

Registration Fee: \$ _____

Hotel: receipt required
with travel expense
statement \$ _____

Meals & Entertainment
per diem: \$ _____

X number of days at conference/75% first and last days of travel

*please use GSA domestic or foreign per diem rates
<http://www.gsa.gov>*

Total: \$ _____

•An estimate of expenses must be included on this request. A travel expense statement must be submitted immediately after travel is completed. Travel expenses which have not been pre-approved by the dean will not be refunded.

Dean's funding priority _____

(1) Conference with presentation

(2) Conference as officer or committee member

(3) Conference attendance

Are you presenting a scholarly paper or exhibit? _____

Have you been approved or received a travel advance from the Dean's Office within this fiscal year (August 1 – July 31)? _____

PRIOR TRAVEL ALLOWANCE: Amount: \$ _____

Chair's Authorization: _____
Signature Date

Dean's Authorization: _____
Signature Date