

Submit Prior To Travel

Traveler's Name:			Bus. Telephone:	
Traveler's Department:				
Date/Time Departure:				
To (Destination):***ALL INTE	RNATIONAL DESTINATIO	ONS ARE REQUIRED	TO BE APPROVED BY THE PRESIDENT'S OFFICE****	
Purpose of Travel:				
	<u>C</u>	Coverage of Class & (Other Activities	
Coverage of Class will be Provid	ed as follows:			
By (list name(s))		or	Make-Up Date	
Are charges paid by Department: YesNo If "No" stop here, get Supervisor's Signature If "Yes" complete the rest of the form Expense Estimate:			Means of Transportation: State Vehicle Vehicle Rental, Bus, Train (circle) Airfare Personal Vehicle*	
Type of Expense	Amount	Per Diem Rate	Payment Method	
Airfare			Travel Card or NET Card	
Personal Vehicle Mileage, Vehicle Rental, Bus, Train (circle)			Travel Card or NET Card Employee Card/Cash	
Lodging: Actual rate per night x How many nights + tax=			Travel Card or NET Card Employee Card/Cash	
Meals			Travel Card or NET Card Employee Card/Cash	
Other: Toll, Parking, Gas, Conference Fee, Taxi/Subway			Travel Card or NET CardEmployee Card/Cash	
Total Est. \$				
Funding Limited To:	Accoun	t Charged:	Account Name:	
Funding Limited To:	Accoun	t Charged:	Account Name:	
Traveler's Signature:		Super	visor's Signature:	
Dean		Presid	ent:	
Area VP:		Contro	ller:	
Accounts Pa	yable/Travel Office:			

^{*} A personal vehicle may be used when a rental or common carrier/state car is not available, is cost effective, or is otherwise appropriate for a justifiable reason. When choosing a personal vehicle when a common carrier/state car or rental IS more cost effective, reimbursement is limited.