

TRAVEL/EXPENSE REQUEST INFORMATION

Complete all fields

NAME: _____

Trip to – City, State: _____

Is this trip international? **Yes or No** | **Guest: First-** _____ **Last-** _____

[If yes, list all the guests traveling with you & submit T-4 Form for you & each guest]

TRAVEL/TRAINING INFORMATION:

What airport are you flying out of? _____

Date and **time** you are leaving: _____ | _____

Date and **time** you are returning: _____ | _____

Class(es)(provide MKT#) and date(s) you are missing: _____

Conference Days: _____

Personal Days: _____

COST OF TRIP/EXPENSE (APPROX.) please enter dollar amount for each:

Airfare \$ _____, Meals \$ _____, Lodging \$ _____, Registration \$ _____, Parking \$ _____,
Rental car \$ _____ Taxi/Shuttles \$ _____, Mileage \$ _____,
Equipment/Software \$ _____, Training \$ _____ Other \$ _____

Total Cost of Trip \$ _____

What account are funds coming from: (department, grants, other): _____

PURPOSE OF TRIP/EXPENSE:

Conference Name/Project/Training: (no abbrev.) _____

(Give details about the number of presentations with titles & information, research, etc. you will be doing, as well as information describing how this expenditure will aid you in supporting university, college, and/or department's strategic goals, such as moving to R1, please provide detail information)

-continue on back if needed...

What arrangements have you made for your class(es): _____

