



TRAVEL REQUEST FORM

Please initiate your request at least 14 days prior to proposed travel, 30 days is optimal for best flights.

Date Submitted:

Department:

Traveler's Name:

UNID:

Departure Date:

Departure city:

Return Date:

Return city:

Preferred Airline:

Departure/Return times:

Frequent Flyer Number(s):

Seat Preference:

TSA Number:

Travel Purpose: Include brochure, speaker confirmation, and/or presenter meeting schedule.

Name of conference OR purpose of travel:

Traveler Presenting: YES NO Official Business: YES NO Professional Project: YES NO

Conference Registration website (include membership numbers/passwords, if applicable):

Prepaid by the department are flight & conference registration only. Reimbursable Expenses can include hotel, ground transportation to/from airport to hotel or conference location and back. (all require itemized receipts). Per Diem will be provided for meals and incidentals.

If another department will be paying for part of your travel expenses, please include:

Dept name:

Admin Contact Person and email:

Dept Chair Name: