



**Office of the Interim Provost and Vice President for Academic Affairs**

**Travel Request Form  
Instructional Personnel\*\***

**Traveler's Name:** \_\_\_\_\_

Title: \_\_\_\_\_ Department: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email: \_\_\_\_\_

**Purpose of Trip** \_\_\_\_\_

**Class Coverage:\*\*** Course \_\_\_\_\_ Sec.: \_\_\_\_\_ Days/Time: \_\_\_\_\_

Substitute Name: \_\_\_\_\_

**Itinerary-- Arrivals/Departures**

**Destination:**

Departing from (city/state): \_\_\_\_\_ (on) Date: \_\_\_\_\_ (at) Time: \_\_\_\_\_

Arriving at (city/state): \_\_\_\_\_ (on)Date: \_\_\_\_\_ (at) Time: \_\_\_\_\_

**Return Trip:**

Departing from (city/state): \_\_\_\_\_ (on) Date: \_\_\_\_\_ (at) Time: \_\_\_\_\_

Arriving at (city/state): \_\_\_\_\_ (on)Date: \_\_\_\_\_ (at) Time: \_\_\_\_\_

**Itemized Expenses**

**No Funds Requested**

Lodging \_\_ days @ \$\_\_\_/day \$ \_\_\_\_\_

Meals \_\_\_ days @ \$\_\_\_/day \$ \_\_\_\_\_

Conference Registration Fees \$ \_\_\_\_\_

Air/Train transportation \$ \_\_\_\_\_

Taxis and Local Travel \$ \_\_\_\_\_

Rental Car \$ \_\_\_\_\_

Misc Expenses \$ \_\_\_\_\_

**Total Itemized Expenses** \$ \_\_\_\_\_

**Funds requested** \$ \_\_\_\_\_

