

Date Submitted \_\_\_\_\_

**Student/Organization Travel Worksheet**

Name (Advisor/Instructor/Student): \_\_\_\_\_ Campus:  C  N  P  VB

Course/Organization: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Time: \_\_\_\_\_ Return Date: \_\_\_\_\_ Time: \_\_\_\_\_

Destination: \_\_\_\_\_  In State  Out of State

Purpose of Trip: \_\_\_\_\_

**ESTIMATED EXPENSES**

Number of Students: \_\_\_\_\_ (Please attach a list of student names along with their Student ID Numbers and a copy of the conference agenda)

Meals (Not included in conference fee): Breakfast # \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Lunch # \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Dinner # \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Total Meals: \$ \_\_\_\_\_

Lodging (Reference current lodging and meal rates)

Nights # \_\_\_\_\_ x Rate per Night: \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Conference/Convention Hotel

(Attach hotel confirmation reservation form)  No  Yes Conference Dates: \_\_\_\_\_

Registration Fees # \_\_\_\_\_ x Fee/Person: \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Number of Vehicles: \_\_\_\_\_

Mode of Transportation (Indicate all modes necessary for this event)

Air  Train  Taxi  Personal Vehicle  College Vehicle  State Vehicle  Rental Vehicle

Car Rental: Days # \_\_\_\_\_ x Rate per Day: \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Round Trip Mileage: \_\_\_\_\_ x Rate per Mile: \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Parking and Tolls: \$ \_\_\_\_\_

Miscellaneous: (Please itemize) \_\_\_\_\_ \$ \_\_\_\_\_

I request a Travel Advance in the amount of: \$ \_\_\_\_\_

I request a Registration Fee to be paid in advance by (Date): \_\_\_\_\_ \$ \_\_\_\_\_

Advisor/Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Activities Coordinator or Designee: \_\_\_\_\_ Date: \_\_\_\_\_

*Preparation of this document is mandatory for all travel. Completed forms must be attached to your travel reimbursement voucher.*

FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Notification to Security: \_\_\_\_\_

Comments: \_\_\_\_\_