College of Engineering, Computing and Applied Sciences REQUEST TO TRAVEL WITHIN US

Name:	Purpose of Trip:
Destination:	
Account #:	
Leave Date:	Return Date:
How will Teachi	ig load be handled while away:
	Expense Breakdown
	Total VISA
Lodging:	NOTES:
Airfare:	YES NO
Registration:	YES NO
Other:	
	Contact Information
Hotel	
Hotel Phone	
Cell Phone	
	Approvals
	Approvals
Supervisor	Date
Department Cha	ir Date

Routing: Submit completed form to departmental financial staff to file.

NOTE: Form must be completed and approved prior to making any travel plans (charges on P-card, reimbursements, etc)