|  |  |  |  |
| --- | --- | --- | --- |
| Traveler’s Name: |  | Faculty contact: |  |
| Destination (city/state): |  | Departure date: |  |
|  | Return date: |  |
| Travel purpose: |  |
| [ ]  RESEARCH | [ ]  COURSE | [ ]  CONFERENCE | [ ]  TRAINING | [ ]  OTHER |
| CONFERENCE NAME: |  |
| TRAVELING WITH STUDENTS? | [ ]  YES | [ ]  NO | **\*STUDENTS MUST COMPLETE BACK OF FORM\*** |
| PRESENTING? | [ ]  YES | [ ]  NO |
|  |
|  |  |  |  |  |
| FUNDING SOURCE: | [ ]  DEPARTMENT | [ ]  GRANT | [ ]  SPLIT FUNDING (describe below) |
|  |
| **COST ESTIMATE** |
| PUBLIC TRANSPORTATION(AIR/RAIL) |  | $ |
| CONFERENCE / REGISTRATION FEE: | $ |
| RENTAL VEHICLE: | $ |
| LODGING: | # OF NIGHTS |  | PER DIEM RATE: |  | $ |
| PERSONAL VEHICLE MILEAGE | # OF MILES |  | PERSONAL MILEAGE RATE: |  | $ |
| TAXI / SUBWAY / PARKING: |  | $ |
| OTHER (DESCRIBE): | $ |
| PER DIEM MEALS (ONLY PAID FROM GRANT SOURCES OR FOR STUDENTS W/ RECEIPTS): | # FULL DAYS |  | PER DIEM RATE: |  | $ |
| # TRAVEL DAYS |  | TRAVEL DAY RATE |  | $ |
| **FUNDING SPLIT** | **TOTAL ESTIMATED COST:** | $ |
| 100006 | $ | 5\_\_\_\_\_\_\_\_\_\_ | $ |  |
| TRAVELER SIGNATURE: |  | DATE: |  |
| APPROVAL SIGNATURE: |  | DATE: |  |
|  |  |  |  |  |
| FOR DEPARTMENT USE ONLY: |
| TA RECEIVED IN BIO OFFICE: |  | SUBMITTED IN CHROME RIVER: |  |
| TA GIVEN TO P.C.: |  |  |  |
| TA SUBMITTED TO AUH: |  | RECEIPTS SUBMITTED TO BIO: |  |
| TA SIGNED BY AUH: |  | RECEIPTS GIVEN TO P.C.: |  |
| APPROVED TA SENT TO TRAVELER: |  | REIMB SUBMITTED IN CHROME: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Student Name: |  | Student ID: |  |
| PERMANENT address |  |
| Address cont’d |  |
| Student email |  |
|  |