



Non-Employee Travel Request and Authorization

Submit completed form to the Business Office.

Name:

ID:

Today's Date:

Travel Location:

Travel Dates:

Purpose of Travel:

Index Number to be charged for travel:

Suggested Sub:

Mode of Travel:

State Car

Personal Car

Airline

If personal car:

Explanation:

Estimated Miles:

Reimbursement Rate Approved:

\$0.58/mile*

\$0.279/mile

**Higher Rate available only if College or rental vehicle not available, or if personal vehicle use is in the best interest of the College.*

ESTIMATED EXPENSES

Transportation: \$

Lodging:

Meals:

Registration:

Other (*explain below)

TOTAL \$ _____

*Other Expense explanation:

Request for Actual Nightly Lodging Cost (if state/federal rate is exceeded)

In State	Out of State
Lodging costs temporarily unavailable due to seasonal demand or to special functions.	Government rates were requested and were not available at hotel where the conference is AND
Emergency travel arrangements preclude being able to find accommodations.	Necessary for purposes of accessibility and/or security to stay at the conference hotel OR
Remote locations with limited accommodations within a 15-mile radius precluded obtaining accommodations at state rates.	Government rates are not available at another hotel within a reasonable distance from the convention hotel OR
	Emergency travel arrangements precluded being able to find accommodations at federal rates.

TRAVEL ADVANCE REQUEST

Do you need a travel advance?

Yes

No

Amount Requested: \$

Please allow two weeks for processing.

Minimum amount - \$100.

Approval:

Traveler Signature:

Date:

Authorizing Signature:

Date: