Travel Request Form

Please turn in this form as soon as possible. No later than 2 week prior to departure date

ΔII to	ravel is to be submitted 2-	3 weeks in advan	\$	_⇔ Encumbrance Total ⇔ \$	·	
				Less Other Amounts		
				Less Pro Card Amount		
				Less Travel Card Amount		
Fund	Orgn.	Acct.	Amount	TOTAL TRAVEL AMOUNT		
TOTAL TRAVE	LESTIMATE \$					
	:her_\$					
	Βαγ3 αι ψ port\$			$_{ m O}$ Only allowed to rent up to Standa		
				er diem rate for all In-state travel is \$		
	: Mode of Travel		attach a go	ase attach business itinerary or if driving foogle maps print out of route with miles		
Mileage #:	Seating	g Preference:				
	Gende					
Personal Date	s:	(Business-	only comparison requ	uired)		
Meeting Dates	::	(Please att	ach business agenda	a)		
	Retu					
	p Trav			Notes:		
Reason for Tri	p:			Other Procurement Used	No	Yes
Mailing Addres	SS: ————			Dept. PCard Used	No	Yes
Employee	' '	tudent Volun		Dept. Travel Card Used	No	Yes
Banner ID:	-					

Travel coordinator use only

TEM (AT) Routing	<u>Y/N</u>	<u>Date</u>
Submitted to traveler		
FW to FO-		
FW to Director/Dean		
FW to OCGA		
Final Approval		

TEM (ER) Routing	<u>Y/N</u>	<u>Date</u>
Submitted to traveler		
FW to Director/Dean		
FW to CRCD-		
FW to Central Travel		