

DELAWARE STATE UNIVERSITY

OFFICE OF BUSINESS & FINANCE

Travel Request & Authorization Form

(This form is to be used for all DSU Personnel traveling on behalf of the University)

~ This form needs to be submitted at least 10 Business days prior to travel & requestor's account must be cleared (i.e. NO OUTSTANDING credit card charges) prior to issuance ~

Approved Requisition#: R XXXXXXXXXX

Date Submitted: 01/29/2025

Name of Traveler: Zhongyan Lin

Traveler's D#: D10059906

Date of Departure: 02/09/2025

Dept ORG Code: ~~2020~~ 2334

Date of Return: 07/01/2025

Description of Trip: Teaching in Ningbo, China Campus

SECTION I (For Card Load Purposes)

A. Transportation Arrangements

Vendor Name	Mode of Transportation	Amount
	Choose an item.	
	Choose an item.	
	Choose an item.	
	Choose an item.	

B. Lodging Arrangements

Location Name – City, State	# of Rooms	# of Stays	Nightly Rate	Amount
Ningbo, China				

C. Meals

Meals for	# of Days	Meal Rate *	Amount
Choose an item.			
Choose an item.			

* Meal Allowance Rates for DSU Personnel are based on the GSA Rate by destination location (<https://www.gsa.gov/travel/plan-book/per-diem-rates>) & Students Per Diem rate based DSU policy - Undergrads (\$28/day) vs Graduates (\$45/day). Both rates include tips. Meals covered by registration packages are **NOT** to be included in the Meal calculation.

D. Other Travel Needs for card use

Description	# of items	Price/ Person	Amount
			\$ 0.00

TOTAL CARD LOAD EXPENSES (SECTION I)

SECTION II (Non-Card Load Purposes)

A. Cash Advance Request (separate form)

Description	# of items	Price/ Person	Amount
Per Diem	55 days	88/day	4840
First day	1 day	66/day	66
Last day	1 day	66/day	66
			\$4972

B. Personal Mileage

Trip	NET Miles Traveled**	Amount
		\$

* Personal mileage rates are based on the time of travel & established by the Internal Revenue Service (chrome-extension://efaidhbmnnnibpcapogldelndmkaj/https://www.irs.gov/pub/irs-drop/n-23-03.pdf)

** NET miles traveled is the distance between your normal commuter to DSU minus your home to destination.

C. Miscellaneous

Description	Amount
	\$

TOTAL NON-CARD LOAD EXPENSE (SECTION II)

4972

TOTAL ESTIMATED EXPENSE FOR ENTIRE TRIP

4972

I understand that a purchase requisition signed by the Department Head and appropriate Budget Analyst must be executed within 72 hours upon my return. I certify that I have accounted to the Business Office for all expenses. I also understand that all travel requisitions must be approved prior to departure for the proceeding trip.

Requests completed & signed should be sent to corporatecards@desu.edu for processing

Zhongyan

1/29/2025

Requestor's Signature

Date

[Signature]

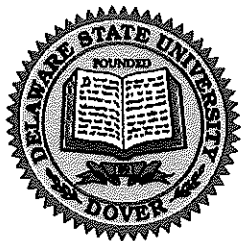
1/29/25

Date

Immediate Supervisor Approval

Grant Supervisor/Approval, if needed

Date



DELAWARE STATE UNIVERSITY

OFFICE OF BUSINESS & FINANCE

Cash Advance Request Form

(This form is to be used for all DSU Employees requesting cash prior to travel, including funds needing to be allocated for group travel. Funds needed to be placed on travel cards will not be included on this form)

~ This form needs to be submitted a minimum of 10 Business days prior to travel & requestor's account must be cleared (i.e. NO OUTSTANDING credit card charges) prior to issuance ~

Approved Requisition#: RXXXXXXX

Date Submitted: January 29, 2025

Date of Travel (start): 2/09/2025

Date of Travel (end): 07/01/2025

Destination: Ningbo,
China

Itemized Request	Count	Rate	Amount
Per Diem	55 days	88/ day	4840
First day	1 day	66/day	66
Last day	1 day	66/day	66
			\$ 4972.00

* Per Diem Rates are based on the GSA Rate based on destination location (<https://www.gsa.gov/travel/plan-book/per-diem-rates>)

** Students Per Diem rate based DSU policy - Undergrads (\$28/ day) vs Graduates (\$45/ day)

*** Funds being allocated to other participants need to attached a list of travelers' names & amount being provided to them.

Cash Advance to/ Requestor: Zhongyan Lin Requestor's D#: D 10059906

Check: ☒ OR Wire: ☒
Wiring Info:

Bank Name: WSFS Bank

Address: 500 Delaware Ave

ABA/ Routing Number: 031100102

Funds Needed by date: 2/12/2025

Bank Swift Code:
Wilmington, DE 19801
City, State & Zip Code:

Account Number: 217088814

Requests completed & signed should be sent to accountspayable@desu.edu for processing

Zhongyan Li
Requestor's Signature

1/29/2025
Date

Immediate Supervisor Approval

Date

Grant Supervisor/ OSP/ RFA Approval

Date

Zhongyan Li