

REQUEST FOR TRAVEL REQUIRED

Name: _____ Date: _____ BANNER ID #: _____

Address: _____ Phone Number: _____
 _____ US Citizen _____ NRA _____
City, State & Zip (Non Resident Alien)

Purpose of Travel: _____

Travel To: _____

Date of Travel

Departure Date: _____ Home Departure Time: _____
 Return Date: _____ Home Return Time: _____

Estimated Expenses:

1. Transportation:

- Airfare \$ _____
- *Remember to keep your boarding passes as proof of travel
- Parking/Taxi or Shuttle Service to Hotel \$ _____
- Mileage your Car _____ miles @ \$.30/mile \$ _____
- Other Expenses \$ _____

2. Subsistence:

	Travel Expense Allowance			
	<u>In State</u>	<u>Out of State</u>		
Breakfast	\$ 8.30	\$ 8.30	X _____	(how many) \$ _____
Lunch	\$10.90	\$10.90	X _____	(how many) \$ _____
Dinner	\$21.30	\$21.30	X _____	(how many) \$ _____
			TOTAL	\$ _____

3. Lodging per night times # of nights: \$ _____ X _____ \$ _____

4. Room Fees/Taxes times # of nights: \$ _____ X _____ \$ _____
TOTAL \$ _____

5. Registration: \$ _____

NOTE: If you are requesting the university PREPAY your registration, please be aware that it often takes as long as 3 weeks for the check to be mailed from UNCC. A completed registration form and the address of recipient should be included with this document.

Submit this form along with event announcement, agenda, itinerary, registration, mileage documentation, pre-paid receipts and/or travel arrangement documentation, etc.

Below To Be Completed By Program Staff

Total Requested Amount: \$ _____

Total Approved Amount: \$ _____

FUND CHARGED: _____