

Travel Information for In-State and Out-State Travel

In-State Travel Out-of-State Travel (Attach Pre-Approval for Travel form)

Name of Person Traveling: _____ Phone: _____

Cost Center to charge to: Professional Development for Staff Cost Center: _____

Purpose of Travel: _____

Location of Event: _____ Date(s) of Event: _____

Expenses

Conference Registration Cost: _____

Link to conference registration site: _____

Dietary Restrictions: _____

Membership Fee: _____

Link to membership fee site: _____

Conference Session Choices Attached (if any)

Overnight Accommodations

Name of Hotel: _____ Hotel Local Phone: _____

Room Type: _____ Event/Block Code: _____ Website: _____

of nights: _____ Arrival Date: _____ Departure Date: _____

Airfare (Out of State Only)

Full name exactly as it appears on your government-issued ID: _____

Date of Birth: _____ Seat Location: _____

Send confirmation to Cell Phone: _____ Personal Email: _____

Airline (attach flight details): _____

Outgoing Flight Date: _____ Departure: _____ Arrival: _____

Return Flight Date: _____ Departure: _____ Arrival: _____

Baggage: Carry-On Cost: _____ Checked Bag Cost: _____

Airport Parking

Parking Company: _____ Type of Parking: _____

Date of Arrival: _____ Time: _____ Exit Date: _____ Time: _____

Ground Transportation

It is preferred that you arrange your own ground transportation. Save your receipts for reimbursement.

Approval

Supervisor Signature: _____ Date: _____