



Name of employee	Title or position
Date of this request	Destination
Purpose of Travel (attach brochure or other relevant documentation, if applicable)	
Date of departure	Date of return

ESTIMATED EXPENSES	
Mileage: round-trip miles @ \$.	\$
Air Fare: round trip	\$
Hotel: days @ \$	\$
Meals: days @ \$ /day	\$
Registration Fee:	\$
Ground Transportation:	\$
Other:	\$
Other:	\$
Other:	\$
TOTAL ESTIMATED EXPENSES	\$

<p>How does this activity relate to your current job?</p> <p>How will your normal job duties be covered in your absence?</p>

Account number to be charged:

Signature of applicant

Supervisor Approval	Date
Vice-President/Dean Approval	Date