



UNIVERSITY EMPLOYEE TRAVEL REQUEST

Date: \_\_\_\_\_
Social Security #: \_\_\_\_\_ Account #: \_\_\_\_\_
Name: \_\_\_\_\_ Allowable Budget: \$ \_\_\_\_\_
Date of Departure: \_\_\_\_\_ Alternative Acct #: \_\_\_\_\_
Date of Return: \_\_\_\_\_ Allowable Budget: \$ \_\_\_\_\_
Destination: \_\_\_\_\_
Purpose: \_\_\_\_\_

Faculty Only: I will miss the following classes and have arranged for them as indicated:

Table with 5 columns: Class, Section, Hour, Dates, How arranged for:
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

In accordance with section TEX. GOVT CODE ANN. S 660.044 (A)& (B), Travel Rules and Regulations for the State of Texas, Coordination of Travel must occur when more than one employee employed by the same state agency travel on the same dates with the same itinerary to conduct the same official state business, then Coordination of Travel is required for each group of four employees and for any fraction in excess of a multiple of four employees. PLEASE NOTE: Justification of travel is required when more than one employee is traveling to the same destination.

I will be part of a University group. Please Circle: Yes or No

List of individuals attending: \_\_\_\_\_
Justification for traveler: \_\_\_\_\_

Estimated Travel Expenses:

University or Private Vehicle Total miles \_\_\_\_\_ @ \_\_\_\_\_ per mile \$ \_\_\_\_\_
Rental Vehicle (State Contract Rates) \_\_\_\_\_
Air Fare (Corporate or CBA) \_\_\_\_\_
Meals Total # days \_\_\_\_\_ @ \_\_\_\_\_ per day \_\_\_\_\_
Lodging (State Contract Rates) Total # days \_\_\_\_\_ @ \_\_\_\_\_ per day \_\_\_\_\_
Registration Fees: \_\_\_\_\_
Incidental expenses: Hotel Taxes \$ \_\_\_\_\_
Fuel for Rental Vehicle \_\_\_\_\_
Other (list) \_\_\_\_\_

Total Estimated Travel Expenses: \$ \_\_\_\_\_

I (am, am not) requesting reimbursement: Traveler: \_\_\_\_\_

Account Manager: \_\_\_\_\_ Supervisor/Chair: \_\_\_\_\_
(If different than Account Manager)

Departmental Dean: \_\_\_\_\_ President: \_\_\_\_\_
( If needed only and for Foreign Travel )