



# TEXAS A&M INTERNATIONAL UNIVERSITY

A Member of The Texas A&M University System

## UNIVERSITY EMPLOYEE TRAVEL REQUEST

Name: \_\_\_\_\_  
 Date: \_\_\_\_\_ Reimbursement Acct # \_\_\_\_\_  
 Social Security # (last 4 only) \_\_\_\_\_ Amount Approved for this Travel \$ \_\_\_\_\_  
 Date of Departure: \_\_\_\_\_ Alternative Acct # \_\_\_\_\_  
 Date of Return: \_\_\_\_\_ Amount Approved for this Travel \$ \_\_\_\_\_  
 Destination: \_\_\_\_\_  
 Purpose: \_\_\_\_\_

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

CLASS	SECTION	HOUR	DATES	CLASS MEETING ARRANGEMENT
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I will be part of a University group attending the same event: YES OR NO

**NOTE:** Justification of each traveler is required when more than one individual is traveling on the same dates with the same itinerary to conduct the same official state business. Justification is required on each traveler's University Employee Travel Request form and on the State of Texas Travel Voucher form. Example of justification required: Co-presenter at conference.

Justification of traveler: \_\_\_\_\_

I will coordinate travel: YES OR NO

**NOTE:** Coordination of Travel is required for each group of four employees and for any fraction in excess of a multiple of four employees.

I understand that only factors relating to official state business will be considered for the infeasibility of coordination of travel for the reimbursement of transportation expenses. **(If needed, attach Justification for Mileage Reimbursement for Inability to Coordinate Travel form.)**

Estimated Travel Expenses:  
 University or Private vehicle Total miles \_\_\_\_\_ x \_\_\_\_\_/mile \$ \_\_\_\_\_  
 Rental Vehicle (State Contracted Rates Only) \_\_\_\_\_  
 Airfare (Corporate or CBA) \_\_\_\_\_  
 Meals (Not to exceed State Maximums) Total #of days \_\_\_\_\_ @ \_\_\_\_\_/day \_\_\_\_\_  
 Lodging (State Contracted Rates Only) Total # of days \_\_\_\_\_ @ \_\_\_\_\_/day \_\_\_\_\_  
 Registration fees: \_\_\_\_\_  
 Incidental Expenses: Hotel Taxes \_\_\_\_\_ Fuel for Rental of Vehicle \_\_\_\_\_  
 Other (List) \_\_\_\_\_  
 Total Estimated Travel Expenses: \$ \_\_\_\_\_

I (am, am not) requesting reimbursement for this trip: Traveler's Signature \_\_\_\_\_

Acct. Manager's Signature: \_\_\_\_\_ Supervisor's, Chair's or Dean's Signature \_\_\_\_\_  
 (If different than Account Manager)