**Faculty Travel Reimbursement Request**

**Faculty Name:**

**Destination:**

**Purpose of Trip:**

**Dates of Travel:**
- Departure Date & Time:
- Arrival Date & Time:

Do you have all your necessary receipts & information? Please put a dollar amount by each requested travel expense:

- Flight Itinerary and Paid Receipt (or some documentation of proof of payment ex: credit card statement)
- Transportation Reimbursement *Ex: Taxi, Shuttle* (Receipt required)
- Registration Receipt
- Paid Hotel Receipt
- Parking Reimbursement Receipt
- Copy of conference/workshop agenda
- Actual Expenses for Meals per day (choose this option if you are rejected the per diem rate and must provide receipts for all transactions)

**TOTAL:**