

## **Travel Request Form**

Name	
Purpose (no abbreviations or acronyms)	
Dates of travel	Actual Conference Dates
Depart Return	Start End
Destination	
Means of Travel If Flying, mean	ns of travel to Indy airport
A Additional account	Account Number Sub
Account Number Sub numbers if applical	ble Account Number Sub
Personal Time O Yes No Note: Personal time can <u>not</u> be taken at the beginning <b>and</b> end of travel	
Start End and be submitted for reimbursement. Beginning <b>or</b> end is acceptable.	
Notes	
Research Advisor Authorization	
If you agree to support the travel of this individual please indicate the accommodations you intend to allow.	
<ul> <li>All travel accommodations are acceptable</li> </ul>	
- Or only these items	
	Transportation 🛛 🔿 Per Diem
Other	
If personal car has been used, will the claim be for: $\bigcirc$ Milage or $\bigcirc$ Fuel receipts only	
If per diem is requested, then $\bigcirc$ Full per diem daily rate, or $\bigcirc$ a rate of $\int day$ . Per diem rates vary by location. Please refer to Travel Management web site for per diem rates. (www.indiana.edu/~travel/traveling/traveling.shtml)	
Advisors Signature	