



TRAVEL REQUEST

The applicant must submit this form for approval five (5) calendar days before departure.

Name of Applicant : _____

Position: _____ Building/Location: _____

Conference Title or Purpose: _____

Location of Conference: _____

Conference Date: From _____ To _____

Approved by: _____ <i>Principal/Supervisor Signature</i>	/ / _____ <i>Date</i>	- - - - _____ <i>Budget Code</i>
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Departure Date: _____ Time _____

Return Date: _____ Time _____

Transportation will be by (check those that apply):

- Personal vehicle
- District vehicle
- Other (specify) _____

Date(s)	B-fast	Lunch	Dinner	Notes:

Estimate of Expenses:

Registration _____

Lodging _____

Transportation _____

Meals _____

Other _____

* Specify Other _____

TOTAL _____

(This section is to be completed **ONLY** if the applicant wishes an advance of funds for the purpose of attending the above conference. Applicant must sign for the advance in person at the District Office **PRIOR** to departure.)

The applicant requests an advance of funds to cover necessary meal expenses for the above conference.

Amount of advance requested: \$ _____

For District Office use only:

\$ _____	Received by _____	Check Number _____
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