

Must be entered in SAP and provided by funding dept(s).	
Funds Reservation No.	

av	el Request Form											
Α	Traveler's First name			Traveler's Last name		Department/Office	C	Cost Center(	s)			
			<u> </u>									
	Destination (city & state/country)				Person(s) accompanying you Dat			Date(s) of	e(s) of Trip			
	Purpose (Please do not use abbreviations in this section.)											
В	Mode of Travel: □	] University car □ Rental car □ Private auto* □ Train □ Plane □ Other, please note:										
		siles per day, a rental car is the preferred mode of transportation.										
С		unding Source (Check all that apply):  Department College/Dean's Office CFEST Other, please note:										
D	Prepayment Request Options Please provide	☐ Travel Advance (Up to 80% of out-of-pocket expenses will be issued via check, approx. 1 week prior to travel).  (Not available for most student research grants)  Home address:										
	information for blocks checked.		□ Prepayment of Registration (attach copy of registration form/information; including remit to address).									
			Prepayn		attacn copy o	registration to	orm/information; <u>incl</u>	1		ue by (		
Ε		1	Transp	ortation: Private car	(at \$ <u>0</u> pe	r mile) / Other			1			
		2	Lodgin	g (Including taxes)					2			
		3	Meals						3			
	Travel Cost Estimate	4	Tolls						4			
		5	Parkin	g					5			
		6	Miscel	laneous					6			
		7	TOTAL	. <b>ESTIMATE</b> (Add line 1 t	through line 6)				7			
		8	REGIST	 ΓRATION FEES (G/L 616	000)				8			
		9	MAXIN	ИUM TRAVEL ALLOW	ANCE				9			
F			you tra dan?	veling to sanctioned	countries inc	luding Iran, Syri	a, Cuba, North Korea	and		Yes	□ No	)
	International Travel Disclosure		Are you traveling with University-owned electronic storage devices such as laptops, smart-phones or external USB hard drives?							l Yes	□ No	)
	*For International travel only	eq:	uipped v ore details	rveling with electronic vith dual-use technolo sat www.ship.edu/public_s	ogy? service/forms/. <u>'</u>	Foreign Travel Disc	losures'			l Yes	□ No	)
		If y		vered 'Yes' to any of	•	ons, please con		'-1 <b>251</b>		<u> </u>		
G	Sequential Authorizations and Dates	1	iraveiers	<u>s</u> First Name	Last Name		Signature			Date		
		2	Chairpers	son/ Supervisor's First Name	Last Name		Signature			Date		
		3	<u>Director o</u>	<u>or Dean's</u> First Name	Last Name		Signature			Date		
	Executive Authorization	Vice	e Presiden	t or Provost			Signature			Date		
	*Both approvals required for international travel	Pre	esident				Signature			Date		
							1					

## TRAVEL REQUEST FORM INSTRUCTIONS

- A The traveler's name, department/office, cost center(s), destination, date(s) of travel, and purpose of the travel must be identified. The destination should be a specific city and state/country. If traveling to a college or university, include that with the city and state/country. Avoid abbreviations in the **Purpose** field, since these may not be known to a reviewer of this form. If someone is accompanying you, add their name(s) in the appropriate field.
- B Specify all modes of transportation required to reach your destination. Board of Governors Policy 1986-07-A states that "the most economical means available, including automobile rentals, should be used consistent with the purpose and constraints of the travel. An employee who does not use the most economical means of travel available, consistent with the purpose and constraints of the travel, will be reimbursed as if the most economical means of travel has been used." If traveling over 80 miles per day, an Enterprise rental car becomes the preferred mode of transportation. An intermediate sized car from Enterprise can be rented for approximately \$36.00/day. Click here for the rental car process.
  If you are checking 'other,' please provide further details.
- C Indicate the intended funding sources associated to support this travel. If you are marking the option 'other', please provide further details.
- D If a Travel Advance or Prepayment of Registration is requested, check the appropriate box and provide the information required/needed in the section. Travel advance checks need to be picked up in Accounts Payable (OM 209). For prepayment of registration, make sure that the *Payable to* section is filled out and the *remit to address* is noted on the form or highlighted in the attached registration information. Remember that this form needs to be turned in to Accounts Payable at least 10 business days before the travel advance check date or registration payment deadline date. The Travel Advance option is NOT available for most student research grants including UGR and GR grants. Student researchers should contact IPSSP (717-477-1251) for further explanation.
- E Complete the estimates and add the total in the appropriate space provided.
- F For international travel, make sure to answer each question by checking the appropriate boxes. If you answered "Yes" to any of the questions, make sure to contact IPSSP (717-477-1251). More details can be found <a href="https://example.com/here">here</a> by clicking the *Foreign Travel Disclosures* link under the Travel section.
- G The form must be signed by the: 1) Traveler, (2) Department Chair or Supervisor, and (3) Dean or Director. For international travel, the form must also be signed by the Vice President and President.
- Note: A **Funds Reservation** must be entered into the financial accounting system to encumber funds <u>prior</u> to the travel occurrence. The Funds Reservation Number must be noted on the top, right corner of the form. If travel is for a non-funded, official University business-related purpose, this form still must be completed and filed within the department.

Questions? Please call Accounts Payable at ext. 1157.