



## EMPLOYEE TRAVEL REQUEST FORM

Please Call 601-979-0978 or 601-979-0695 for assistance

**Submit this form with all approvals applied at least two weeks in advance of the travel commencement date for IN State and 1 month for OUT of State and International.**

In-State \_\_\_ Out-Of-State \_\_\_ International \_\_\_ Travel Advance Requested \_\_\_

Name: \_\_\_\_\_ J#: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Department Name: \_\_\_\_\_ Travel Dates From: \_\_\_\_\_ To: \_\_\_\_\_

Destination(s): \_\_\_\_\_ Email of Admin Staff: \_\_\_\_\_

Purpose of Travel (Include name of Conference or Event as applicable):  
 \_\_\_\_\_  
 \_\_\_\_\_

Fund \_\_\_\_\_ Org Code \_\_\_\_\_ Program Code \_\_\_\_\_ DOB for Airfare with JSU Travel Credit Card \_\_\_\_\_

**Make Sure Name Listed Matches Govt' I.D. for Airfare**

Number of Students Traveling with Employee \_\_\_ Have Student Travel Forms Been Submitted to Student Affairs?

	Reimbursable to Traveler	Pre-Paid List Requisition #	JSU Travel Credit Card	Travel Advance
Meals				
Lodging				
Registration Fees				
Car Rental				
Other				
Personal Vehicle				
Public Carrier				
Total				

**ATTACH ALL DOCUMENTATION – HOTEL RESERVATION, AIRFARE QUOTES, CONFERENCE REGISTRATION & OTHER ITEMS RELEVANT TO THE TRIP**

My signature below indicates that I understand I am responsible for making a good faith effort to secure the most economical and reasonable method of transportation, lodging and all other costs. I certify that all costs incurred and reported for this period of travel are true and accurate in all respects.

1. Traveler \_\_\_\_\_ Date \_\_\_\_\_ 2. PI or Title 3 if Using Federal Funds \_\_\_\_\_ Date \_\_\_\_\_ 3. Department Head / Chair \_\_\_\_\_ Date \_\_\_\_\_

4. College Dean / Director of Unit \_\_\_\_\_ Date \_\_\_\_\_ 5. Grants & Contracts for Federal Funds \_\_\_\_\_ Date \_\_\_\_\_ 6. Vice President \_\_\_\_\_ Date \_\_\_\_\_

7. Provost \_\_\_\_\_ Date \_\_\_\_\_ 8. President (Req'd if International & VPs) \_\_\_\_\_ Date \_\_\_\_\_ 9. Travel Office \_\_\_\_\_ Date \_\_\_\_\_