



Request for Travel Funds (Faculty Use)

Please be aware that the Department does not typically have enough funds to support the full cost of professional travel. *Warning: Travel reimbursement requests must be submitted no later than 45 days from the end of your business trip.*

Information		
Name:		
Destination:	Dates of Travel:	
Purpose of Travel (When relevant, specify the organization or type of conference, workshop, meeting, etc., and indicate the exact nature of your participation, including specific paper or panel titles):		
Estimated Costs		
Airfare: http://f2.washington.edu/fm/travel/airfare	<input type="checkbox"/> round trip flight <input type="checkbox"/> state contract	Amount: _____
Hotel costs: http://www.gsa.gov/portal/category/104711		Amount: _____
Per diem (Please use state per diem rates): http://www.gsa.gov/portal/category/104711		Amount: _____
Other Costs:	<input type="checkbox"/> conference registration	Amount: _____
	<input type="checkbox"/> ground transportation	Amount: _____
	<input type="checkbox"/> other (please specify):	Amount: _____
TOTAL:		_____
AMOUNT REQUESTED (If different from total): _____		
Confirm and Sign		
Are you receiving funding from any other source?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, how much and from where?	Source: Amount:	
DATE: _____	YOUR SIGNATURE: _____	

FOR OFFICE USE ONLY	
Total Amount Approved:	_____
Date: _____	Chair's Signature: _____
Fund to allocate from:	_____