



## TRAVEL REQUEST FORM

FOR DOMESTIC TRAVEL ONLY

Requested By: \_\_\_\_\_ Email: \_\_\_\_\_ EMPLID: \_\_\_\_\_

Destination: \_\_\_\_\_ Departure: \_\_\_\_\_ Return: \_\_\_\_\_

Reason for Travel: \_\_\_\_\_

Class arrangements: \_\_\_\_\_

### Estimated Expenses

Registration Fee: \_\_\_\_\_  
 Airfare: \_\_\_\_\_  
 Lodging: \_\_\_\_\_  
 Meals: \_\_\_\_\_  
 Mileage (.625 mile): \_\_\_\_\_  
 Other: \_\_\_\_\_

**\*PLEASE NOTE THE DEPARTMENT P-CARD IS RECOMMENDED FOR REGISTRATION FEES AND AIRFARE. PLEASE WORK WITH YOUR ADMINISTRATIVE COORDINATOR FOR THESE PURCHASES. PLEASE SUBMIT REMAINING EXPENSES FOR REIMBURSEMENT AFTER TRAVEL HAS BEEN COMPLETED.**

Estimated Total Amount: \_\_\_\_\_

Account Type: \_\_\_\_\_ Project Number: \_\_\_\_\_

Comments: \_\_\_\_\_

\*I certify that travel expenses reimbursed from outside parties will not be submitted to Clemson University for reimbursement. I understand that reimbursement is contingent upon funds allocated for travel each year for departmental travel.

Requester: \_\_\_\_\_ Date: \_\_\_\_\_

Director: \_\_\_\_\_ Date: \_\_\_\_\_

Business Office: \_\_\_\_\_ Date: \_\_\_\_\_

PI: \_\_\_\_\_