Union College

Travel Requisition

Department _____

Contact _____

Phone # _____

Budget # _____

Last 4 CC being used _____ CC holders Initials

Destination (city, state)

_____

Name of School if applicable

_____

Number of People _____

Purpose of trip _____

Academic Administrative Staff Athletics

Travel Dates:

Departing _____

Returning _____

Mode of transportation:

Rental Van Charter Bus Enterprise Personal Airline

Projected cost of travel:

Union Rental Van _____ x _____ = $ _____
(# vans, # days)

Charter Bus estimated cost = $ _____

Enterprise _____ x _____ = $ _____
($ Price, # days)

Personal _____ x _____ = $ _____
(miles, $per mile)

Airlines _____ x _____ = $_____
(# people, # tickets)

Please Complete This Entire Form

Projected Costs for this Travel Requisition:

Meals _____ x _____ x _____ = $_____
(Cost, # days, # people)

Rooms_____ x_____ x _____ = $_____
(Cost, # nights, # people)

Fuel estimated cost = $ _____

Misc. Travel costs = $ _____

Registration Fees or Entry Fees = $ _____

If a check is needed,
please submit a check request

Total Projected Cost of trip = $ _____
(including Transportation costs)

Itemized Receipts required for ALL Meals!
Along with a list of all students and coaches

Additional information

_____

_____

_____

Authorization

_____
Requested By

_____ [ ]
Department Head **current budget balance**

_____
Business Office Approval (VP of Finance over $5,000)

_____
President (over $10,000)

PO #:	
Budget after :	
Date received:	
Processed by:	

For Business Office Use Only