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| --- | --- | --- | --- | --- | --- | --- |
| **Fayetteville Technicial Community College** Request for Travel **(Type all Entries)** | | | | | | |
| **\* Name** |  | **Datatel Person ID # (7 Digits)** |  | | Date |  |
|  | **(As it appears on your Social Security Card) (SSN-Last 4 Digits)** |  | |  |  | |

|  |  |  |
| --- | --- | --- |
| **Department** | |  |
| Destination |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Departure Time/Date |  | Return Time/Date |  |

|  |  |
| --- | --- |
| Mode of Transportation |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Reimbursement Requested | **Yes** |  | No |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Source of Funds | **State** |  | **Other** |  | Budget Code |  |

|  |  |
| --- | --- |
| Estimate of Official Travel Expenses per Individual | **Type of Subsistence** |
| **In-State Out-State** | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Mileage/Air Fare | |  |  |  |  | **Breakfast**  **Lunch**  **Dinner**  **Room** | **8.60**  **11.30**  **19.50**  **75.10**  **$114.50** | | **8.60**  **11.30**  **22.20**  **88.70**  **$130.80** |
| **Meals** | |  |  | | |
| Room       Plus Tax | |  |  | | |
| **Registration** | |  |  | | |
| Other |  |  | **Excess Funds Requested:** | | | | |  | |
| Total Expenses | |  |

|  |  |
| --- | --- |
| **\*\*Purpose of Travel(Please complete addendum on page 2):** |  |
|  | |

|  |
| --- |
| **\*\*Attach supporting documentation.** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Coverage of Classes |  | | | | |
|  | | | | | |
| **Approval Signatures** | | | | | |
|  | | |  |  | |
| **Department/Division Chair/Coordinator/Date Associate Vice President/Date** | | | | | |
|  | | |  |  | |
| Dean/Director/Supervisor/Date | | |  | Vice President/Date | |
|  | |  | | |  |
| **President/Date**  **\*Please Note: Attach list of names in case of more than one traveler. Overnight travel, Registration, and Excess Fee require approval of President.**  **\*\*Attach support documentation**  **Distribution: Original to Business and Finance** | | | | | |

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##### Request for Travel

**(Addendum)**

1. **What individual and/or organizational improvement goal will this address?**

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1. **What job embedded deliverables, actions, or expectations are expected as a result of participating in this event?**

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1. **How will you measure success or impact of the planned improvement?**

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