

Travel Application Information

Department of Dance

Name: _____

Destination: _____

Name of Event: _____

Purpose of Travel and How it will Benefit the University: _____

Date(s) of travel: _____

beginning

ending

Number of Working Days included in Travel: _____

How will classes (if any) be covered when absent: _____

Date returning to Work: _____

How are you travelling: Personal Vehicle* Personal Vehicle with SHSU Gas Card
 SHSU Vehicle Airplane
 Other: _____

*If by personal vehicle, are you carpooling Yes No

If yes, name of person with whom you are carpooling: _____

Estimated Cost:

Registration	\$
Mileage (\$0.575/mile) X	\$
Hotel (check gsa.gov for per diem rates)	\$
Air fare	\$
Rental car	\$
Meals (check gsa.gov for per diem rates)	\$
Other (taxi, parking, baggage fees, etc.)	\$
TOTAL	\$