



Politics & International Affairs Student Travel Application

(TEI/O – TP)

File Name: Travel Worksheet 30.doc

TWO PAGES

Rev:8/08

Form Date: August 28, 2002

Request Airline/Registration Pre-Travel Reimbursement? Yes No

University Vehicle? Yes No

Emplid:

Student Name and Academic Program:

Destination:	Code:	Purpose:	Code:
Departure Date:	Time:	Travel Authorization # (TE I/O)	
Return Date:	Time:	Travel Voucher # (TP)	
(Acct #) AGEN:	ORG:		

			TE I/O ESTIMATE	TP ACTUAL CLAIM
MILEAGE				
Must Include Memo to Justify Driving Own Vehicle Out-of-State				
In-State = 7610-10	Out-of-State = 7620-10	Foreign = 7640-10	\$	\$
<i>Number of miles (Round Trip) x 44.5 cents/mile</i>				
Driver's License #: Attach mapquest printout or submit gas receipts if funds limited				
FOOD				
MUST Submit Itemized Receipts				
Note: Receipts must be for individual; groups obtain separate checks				
In-State = 7610-20	Out-of-State = 7620-20	Foreign = 7640-20	\$	\$
Number of Meals Claiming:				
<i>Please tape your receipts onto an 8 x 10 piece of paper.</i>				
You will NOT be reimbursed for meals provided by a Conference or on a flight.				
** You will NOT be reimbursed for alcoholic beverages.**				
PUBLIC TRANSPORTATION				
MUST Include Copy of Itinerary WITH THIS FORM.			Receipts Required With Claim	
In-State = 7610-30	Out-of State = 7620-30	Foreign = 7640-30		
Airfare			\$	\$
Taxi			\$	\$
Bus			\$	\$
Other			\$	\$
P/Card	Vendor		\$	\$

Meal Time Frame

Leave Before 6 am
 Leave Before 11 am, Return After 2 pm
 Return After 8 pm, Or Overnight Stay

Meal

Breakfast
 Lunch
 Dinner

LODGING			\$	\$
MUST Submit a Zero Balance Receipt With Claim. (Itemized Receipt)				
Note: If Receipt Is Not Zero Balance, Must Include Charge Slip				
In-State = 7610-40	Out-of-State = 7620-40	Foreign = 7640-40		
P/Card	Vendor #			
_____ nights @ \$_____ per night = \$_____				
_____ nights @ \$_____ per night = \$_____				

OTHER i.e., airport parking, telephone, fax, etc			\$	\$
Receipts Required With Claim				
In-State = 7610-90	Out-of-State = 7620-90	Foreign = 7640-90		
\$				
\$				
\$				
P/Card				
Conference Registration Fees				
MUST Include Copy of Registration Form, Agenda, & Meeting Announcement WITH THIS FORM. Receipt Required With Claim. Originals due with Claim.				
7396-10	P/Card	PD		
TOTAL: ESTIMATE / ACTUAL CLAIM			\$	\$

GRADUATE/Undergraduate STUDENTS (individuals):

- Funding will not be awarded unless the paper is being presented for the **FIRST TIME** and has officially been accepted to the conference. (If there are multiple authors, only **ONE** will receive funding.)
- With this application you must submit the abstract and a copy of the letter or e-mail of acceptance.

Conference: _____

Paper Topic: _____

Graduate Students - Semester of Completion:

POS 600 _____ POS 601 _____ Core Course in Emphasis Area: _____

****Advisor Approval:** _____

Student Group Travel:

****Faculty Sponsor/Advisor Approval:** _____

(For Group Travel, please attach appropriate forms and a list of all students and their ID numbers, as well as the name and contact information for the person coordinating the group travel. The coordinator may be a student or the faculty sponsor.)

ALL STUDENTS:

**** MUST OBTAIN ADVISOR APPROVAL PRIOR TO SUBMISSION TO DEPARTMENT FOR FUNDING. ****

Other Funding Applied for (Dept. and Amount): _____

Copies of award letter(s) must be provided.

Department Office Use
Amount Awarded:
Area/Orgn:
Department Chair's Signature:
Date:
Dept. must retain a copy for records purposes, as well as copies of any other funding sources.