

*****575 G9FJ=79 @5FB=B; .
 GHI 89BH'HF5J9 @5I H<CF=N5HCB'

| |
|-----------------|
| 85H9'GI 6A+H98' |
| |

B'7 "8 YdUfha YbhcZ7 ca a i b]mi7 c``Y[Yg'5 W]cb'F Yei YghX."

- | | | |
|--|---|--|
| <input type="checkbox"/> Out-of-State Travel | <input type="checkbox"/> Confirmation of Verbal Approval | <input type="checkbox"/> In-State Excess |
| <input type="checkbox"/> Out-of-Country Travel | <input type="checkbox"/> Blanket Travel Authorization | <input type="checkbox"/> Initial Request |
| <input type="checkbox"/> Reimbursement Authorization for Non-State Employee | <input type="checkbox"/> Special Authorization Allowable | <input type="checkbox"/> Revised Request |
| | <input type="checkbox"/> Request for Additional Information | <input type="checkbox"/> Other _____ |

TRAVELERS (List students and employees – use additional page if necessary.)

| NAME | STUDENT ID# | PHONE # | E-MAIL ADDRESS |
|------|-------------|---------|----------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | |
|------------|------------------|
| TRAVEL TO: | SOURCE OF FUNDS: |
|------------|------------------|

| | | |
|---|--|---------------------------|
| MODE OF TRANSPORTATION: (Mileage Rate \$.565) | MOTEL: (In-State: \$65.90 / Out of State: \$77.90) Provide Justification if over this rate. \$ _____ | REGISTRATION: \$ _____ |
|---|--|---------------------------|

SUBSISTENCE EXPENSES:

| | |
|---|-------------------------------|
| A YU'dYf'XjYa fUHyg.' | TOTAL COST OF MEALS: \$ _____ |
| <u>In-State:</u> | <u>Out-of-State:</u> |
| Breakfast: \$8.20 | Breakfast: \$8.20 |
| Lunch: \$10.70 | Lunch: \$10.70 |
| Dinner: \$18.40 | Dinner: \$20.90 |
| No. of Breakfasts ____ x No. of People ____ = _____ | |
| No. of Lunches ____ x No. of People ____ = _____ | |
| No. of Dinners ____ x No. of People ____ = _____ | |

| | | |
|--|---------------------------------|------|
| REQUESTING CLUB/ STUDENT ORGANIZATION: | 89D5 FHA9BH5 @5DDFCJ5 @ | |
| | DIRECTOR OF STUDENT LIFE | DATE |
| | VICE-PRESIDENT/STUDENT SERVICES | DATE |

| | |
|-----------------------------|--|
| TOTAL ESTIMATED EXPENDITURE | DATES OF TRAVEL: PERIOD BEGINNING: _____ PERIOD ENDING: _____ |
|-----------------------------|--|

DI FDCG9'5B8'9LD@B5HCFMF9A5F?G.
 @GH'C: 'CH<9F'GH5: : 'A9A69FG'CF'HF I GH9G'A5?-B; 'HF-D.'

fH<-G'G97HCB: CF'GH5H9'C: : =9'I G9'CB@M

| | |
|---|---|
| <input type="checkbox"/> REQUEST APPROVED <input type="checkbox"/> REQUEST DENIED <input type="checkbox"/> REQUEST RETURNED | APPROVAL IS CONTINGENT UPON AVAILABILITY OF FUNDS AND SUBJECT TO LIMITATIONS IMPOSED BY G.S. 138.8. |
|---|---|

COMMENTS OR REPLY:

| | | |
|-------------------------------------|-----------|------|
| APPROVAL FOR OUT OF STATE TRAVEL | PRESIDENT | DATE |
|-------------------------------------|-----------|------|

BCH9. ' D'YUgY'gi Va]hH]g'Z:fa 'Ucb['k]h 'UWca d'YhX'UbX'g][bYX'9a d'cmYY'HFUj Y'5i h cf]nU]cb'Z:fa 'Z:f'YUW 'Ya d'cmYY'k\ c'k]''VY
 hfUj Y]b['k]h 'h Y'gh XYbty"