



Faculty/Academic Affairs Staff Travel Pre-Approval Form 2024

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Destination: \_\_\_\_\_

Purpose of Trip: \_\_\_\_\_

Depart Date: \_\_\_\_\_ Return Date: \_\_\_\_\_ P-Card Last 4 Digits \_\_\_\_\_ (If applicable)

All expenses, EXCEPT for meals and fuel, may be charged to a p-card. Meals and incidentals will be reimbursed using per diem.

Fund Account: \_\_\_\_\_ v [ • W CE }:( d CE Cross Faculty Dev: \_\_\_\_\_ BKT Grant: \_\_\_\_\_ Other: \_\_\_\_\_

Estimation of Expenses (please fill in all that apply)

Personal Vehicle (67/mile): \$ \_\_\_\_\_ (Crawfordsville Indy Airport 104 miles= \$9.68)

College Vehicle (.40/Mile): \$ \_\_\_\_\_

Flight/Baggage: \$ \_\_\_\_\_ Booked through Travel Coordinator? \_\_\_\_\_

Parking/Ground Transportation \$ \_\_\_\_\_

Hotel/Lodging \$ \_\_\_\_\_

Registration \$ \_\_\_\_\_

How many meals are provided by the conference and/or hotel

Breakfast # \_\_\_\_\_ Lunch # \_\_\_\_\_ Dinner # \_\_\_\_\_ All Meals \_\_\_\_\_

Meals:

Are you requesting reimbursement for meals? \_\_\_\_\_

\* If yes, meals will be reimbursed at the per diem rate of 75% for the first and last day of travel with a max of 5 days total. Receipts are not needed and any meals provided through a conference/meeting will be subtracted from the per diem reimbursement www.gsa.gov/travel/planbook/per-diem-rates

Meal Per Diem: Whole Day: \$ \_\_\_\_\_ First/Last Day (75%): \$ \_\_\_\_\_ Total Per Diem: \$ \_\_\_\_\_

Total Estimated Expenses: \$ \_\_\_\_\_

Hourly and Salary Staff Only:

Signature: \_\_\_\_\_ Fund Account: \_\_\_\_\_

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DOC Notes: Prof Travel Balance: \$ \_\_\_\_\_ FDC Balance: \$ \_\_\_\_\_ BKT Balance: \$ \_\_\_\_\_