

K-State Student Union

TRAVEL REQUEST FORM

Date: _____

Requesting employee name: _____

Travel destination: _____

Travel departure date: _____ Departure time: _____ a.m./ p.m.

Travel return date: _____ Return time: _____ a.m./ p.m.

Purpose of travel: _____

Name of conference (if applicable): _____

Transportation mode(s) *Refer to Union policy 4882 re. business travel expenses.:

Union vehicle Vehicle rental Airplane Other: _____

Transportation cost: _____ Lodging cost per night (if applicable): _____

Type of lodging: Hotel Airbnb/VRBO Other: _____

Hotel name and address (if applicable): _____

Registration fee: _____ Meals are or are not included in the registration fee.

Estimated cost of meals not covered in registration fee: _____

Quantity of meals not covered: Breakfast(s) _____; Lunch(es) _____; Dinner(s) _____

Incidental expenses (parking fees, tolls, etc.): _____

Additional information you would like to include to aid in an informed decision to approve the travel request:

Total estimated cost of travel: _____

Department head signature of approval: _____ Date: _____

Executive Director's signature of approval: _____ Date: _____

Regardless of whether the requested travel was budgeted for, a Travel Request Form must be completed with the appropriate approval signatures before travel arrangement can be made. Once approved, all travel expenses should be turned in to the K-State Student Union Business Services Department within 5 business days of the return from travel.

Submit form and supporting documentation to:

K-State Student Union | Attention Business Services | Rm. 311
918 N. MLK JR. Drive, Manhattan, KS 66506
(785) 532-6575 | unionbusofc@k-state.edu

R 11/29/22