

PROFESSIONAL MEETING TRAVEL EXPENSE PRE-APPROVAL

Refer to pages 39–41 of the Faculty Handbook.
Submit this form to the Dean of the College’s office.

Name: _____ Date: _____

Destination (city, state/country): _____

Purpose of trip: _____

Date/Time Depart: _____ Date/Time Return: _____

Number of days to nearest quarter of a day: _____

Will you be using a college vehicle or requesting a college driver? _____

Mileage: _____ x 58 cents/mile \$ _____
From/to Crawfordsville–Indianapolis airport=100 miles = \$58.00

Flight \$ _____

Other \$ _____

Parking \$ _____

Ground transportation \$ _____

Registration \$ _____

Hotel, Food \$ _____

(Per diem for hotel/food is based on federal guidelines w/\$150 min. per diem and 5-day max. international travel per diem is \$250) www.gsa.gov/travel/plan-book/per-diem-rates

TOTAL ESTIMATED EXPENSES \$ _____

Note: P-cards are not to be used by faculty and assoc. faculty to pay for conference travel expenses that are to be reimbursed from the Dean of the College Professional Travel or Faculty Development funds.

Traveler’s signature: _____

Dean of the College’s Office signature: _____

Dean’s Office Notes:

Per Diem - Hotel: _____ Food: _____

Professional Travel Balance: _____

PROFESSIONAL MEETING TRAVEL EXPENSE REIMBURSEMENT REPORT

For reimbursement, ALL receipts must accompany a printed version of this report.
Write the expense category (food, parking) at the bottom of each receipt.

Please note any date/time changes:

Date/Time Depart: _____ Date/Time Return: _____

Number of days to nearest qtr. day: _____

Mileage: _____ x 58 cents/mile \$ _____
From/to Crawfordsville–Indianapolis airport=100 miles = \$58.00

Flight \$ _____

Other \$ _____

Parking \$ _____

Ground transportation \$ _____

Registration \$ _____

*Reimbursement will be the lesser of these: actual or per diem (hotel, food).

*Actual expenses–Hotel, Food (receipts) \$ _____

OR

*Per diem–Hotel, Food (per diem \$ _____) \$ _____

(Per diem for hotel/food is based on federal guidelines w/\$150 min. per diem and 5-day max. international travel per diem is \$250) www.gsa.gov/travel/plan-book/per-diem-rates

Total expenses \$ _____

AMOUNT TO BE REIMBURSED \$ _____

Note: P-cards are not to be used by faculty and assoc. faculty to pay for conference travel expenses that are to be reimbursed from the Dean of the College Professional Travel or Faculty Development funds.

Traveler’s signature: _____

Home address: _____

Dean of the College’s Office signature: _____

Account number: _____