

Travel Request Form



No travel expenses shall be authorized without prior approval.

This form is for:

- Out of State Travel Expense In-State Travel Expense Use of Privately Owned Vehicle

Name: _____ Personnel Number: _____

Operating Unit: _____ Purpose of Trip: _____

Conference Benefits and Post Conference Communication:

Which customers or clients will benefit from your attendance at this conference?

Destination: _____

Date of Departure: _____

Mode of Travel: _____

Date of Return: _____

Cost of Trip:

Transportation _____

Meals _____

Lodging _____

Registration _____

Car Rental (Requires Justification) _____

Other (Please Explain Below) _____

Total For Trip _____

Check Here if Lodging Exceeds Federal Per Diem (if yes, please explain below).

Approved

Administrative Use Only

Disapproved

Justification:

I have read and understand the State of Arkansas Travel Regulations as contained in the [ADHE Employee Policy](#).

Signature of Traveler

Date

Approval

Date

Director

Date

Federal Domestic Per Diem Site: www.gsa.gov/perdiem