

# UNIVERSITY OF WYOMING TRAVEL REQUEST

Must be completed prior to the commencement of all work related travel independent of reimbursement status.

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

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

Travel Dates & Times: \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

Funding Source(s) (if travel is to be paid): \_\_\_\_\_

## Mode(s) of Transportation

UW Fleet Vehicle\*(Reservation # \_\_\_\_\_/must save itemized gas receipts for reimbursement)

Personal Vehicle (must provide license plate number and odometer readings for indirect routing & terminal mileage)

*Passengers may travel on University Business in a personal vehicle if they sign a Personal Vehicle Passenger Waiver, and have both the waiver and this form approved by the department head or designee prior to the travel, found at:*

<http://www.uwyo.edu/administration/operations/risk-management/vehicle-use-policy-information.html>

*Also, if you choose to travel on University Business in your personal vehicle, please understand that your personal auto insurance will be primary.*

Commercial Airplane       Rental Vehicle\*       Other: \_\_\_\_\_

***\*Passengers are not allowed to travel on UW business if they are not directly related to and/or required as part of Official University Business. (Please see administrative office or department head for clarification on rental cars (especially those charged on P-Cards and for field projects.)***

**By my signature below**, I verify that there are no passengers traveling in the UW or Rental Vehicle indicated above, that are not required as part of official UW business, as per UW's Official Vehicle Policy.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Reimbursement Method

Actual lodging only (must save all itemized lodging receipts)

Actual lodging plus M&IE (must save all itemized lodging receipts)

Actual lodging plus actual meals (must save all itemized lodging and meal receipts)

Actual lodging plus combo of M&IE and actual meals (must save all itemized lodging and meal receipts)

M&IE or actual meals only (must save all itemized meal receipts for actual meals)

**Estimated Travel Expenditures**

**PCARD Expense (card name, date & amount)**

Registration \_\_\_\_\_

\_\_\_\_\_

Airfare \_\_\_\_\_

\_\_\_\_\_

Other Transportation \_\_\_\_\_

\_\_\_\_\_

Lodging \_\_\_\_\_

\_\_\_\_\_

M&IE \_\_\_\_\_

**TOTAL ESTIMATE \$** \_\_\_\_\_

Actual Meals \_\_\_\_\_

**PCARD TOTAL \$** \_\_\_\_\_

Parking/Other \_\_\_\_\_

**CASH ADVANCE \$** \_\_\_\_\_

**ALL travel must be approved by appropriate designee prior to departure. This form will be kept on file in the department. If you are a student, please have applicable advisor sign this form before forwarding to appropriate designee for signature.**

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**Approved by Department Head**

**Date**

**Approved by Advisor (students)**

**Date**