

TRAVEL REIMBURSEMENT REQUEST FORM

Department of Computer Science

Today's Date: _____

Name: _____

Banner ID #: _____

Email Address: _____

Professor Approval: _____

Destination(s): _____

Detailed Purpose of Trip (Conference/Meeting flyer required):

Will any portion of trip be personal? YES NO

If yes, dates: _____

Name of event: _____

Event dates: FROM _____ TO _____

Departure date & approx time: _____, _____ AM/PM

Return date & approx time: _____, _____ AM/PM

1. Airfare: **Receipt/Documentation required \$** _____

- Paid using P-card - Paid in advance by traveler

2. Will your vehicle be left at the El Paso Airport overnight parking? (original receipt will be required): YES NO

3. Car rental: (receipt with partial CC # will be required): YES NO

4. Shuttles: (original receipt will be required): YES NO

5. Lodging: (detailed receipts/folios with partial CC # will be required): YES NO

6. Per diem options: MEALS ONLY LODGING ONLY MEALS & LODGING

* If not claiming per diem, all meal receipts are required for reimbursement

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7. Registration Fee: **Documentation required**

- Paid using P-card - Paid in advance by traveler

8. Other claims or pertinent info: _____

INDEX NUMBER: _____

PI APPROVAL SIGNATURE: _____