## KANSAS STATE UNIVERSITY REQUEST FOR TRAVEL

Document Date:
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This is to request that the following travel be approved. Approval does not necessarily mean that the total estimated expenses may be claimed for reimbursement. Reimbursement is made in accordance with applicable regulations and can be determined only after the travel voucher has been processed by Financial Services and the State Division of Accounts and Reports.

Traveler/Title: De				partment <u>:</u>	artment:			
Destination:							_	
Purpose of travel	:						_	
	Date Leaving:		Returning:					
Meeting Dates:	Beginning:		Ending:					
TRANSPORTATION EXPENSES:  Private Car Motor Pool Rental Car \$ -			\$	_ Tran	ESTIMATED TOTALS:  Transportation: \$  Meals: \$			
Miles driven:Other					ging:		_	
		o estimate per diem			istration:			
		Rate Per Day:				Registration fe		
Lodging – No. of	f Days:	Rate Per Day:		В_	_ L	D		
Registration Fee	e – Who paid:							
Miscellaneous C	Costs – Explain:							
KSU Account(s) funding travel:  Project Name		Project Numbe	er Am	Amount		APO/TV Number		
Other KCI Travel							_	
Other KSU Travelo	ers:						_	
Approval Request	ted by:				Date:		_	
Department Authorized Signature:					Date:			

The completed form is to be maintained on file in the authorizing official's office for five years. The authorized signature and traveler cannot be the same person.

Effective January 1, 2016 per diem rates are calculated based on specific location of travel. See links below. CONUS (Contiguous United States): http://www.gsa.gov/portal/content/104877

OCONUS (Outside Contiguous United States-Alaska, Hawaii, U.S. Territories): http://www.defensetravel.dod.mil/site/perdiemCalc.cfm INTERNATIONAL (All Non-US States and Territories): https://aoprals.state.gov/web920/per\_diem.asp