



Quincy University

Travel Notification and Funding Request

Date: _____

Name: _____ School: _____

Purpose and Place (cite official function if one): _____

Inclusive dates of absence: _____ Method of travel: _____

Others making same trip: _____

Explain how your classes or duties are to be covered during your absence: _____

Signature: _____

Request for Funding

Estimate of Expenses:

Registration Fees _____

Travel _____

Lodging _____

Meals _____

Other _____

Total _____

Funding Approved

Total Authorized: _____

(The total authorized is the maximum allowed for this trip.)

Account Number Charged

Travel advances must be requested from the Business Office 10 days prior to the trip and an Itemized Expense Voucher and receipts submitted following the trip. For reimbursement of expenses, submit receipts and an Itemized Expense Voucher to the Business Office.

Approval Signatures:

School Dean or Unit Director

Vice President for Academic Affairs

COPIES TO

1) Business Office

2) Academic Affairs Office

3) School

4) Traveler