

DALTON STATE COLLEGE
Dalton, GA

TRAVEL APPROVAL FORM

This form must be on file with the Business Office before making any trip for which reimbursement for expenses is expected. This will indicate that funds are available. It will also show for insurance purposes that the employee was on official duty for the University.

I request authorization to travel for the College, and to be reimbursed for expenses in accordance with College travel policies.

Employee Name (**Please Print**)

Expected Departure and Return

Depart: Date
Time

Return: Date
Time

Destination
Purpose of Trip

Estimated Expenditures*

Mileage @ per mile
Daily Hotel Rate # days
Daily Food Cost # days
(Maximum of \$28 per day pro-rated)
3 meals per day breakfast/lunch/dinner \$28.00
2 meals per day breakfast/lunch 13.00
breakfast/dinner 21.00
lunch/dinner 22.00
1 meal per day breakfast 6.00
lunch 7.00
dinner 15.00

Click to see chart

Air Fare
Registration Fees
Taxi
Other _____

TOTAL ESTIMATED COST

Please indicate (*) which items, if any, were prepaid by GSW

Reimbursement for above expenses will be charged to:

Account Number

Employee Signature

APPROVAL:

Department Head
or Vice President for Academic Affairs

Vice President for Fiscal Affairs