

**Travel Request**

**\*\*MUST be completed and approved before ANY travel arrangements are made\*\***

(Please print)

SUBMIT COMPLETED, SIGNED FORM TO: [agrbus@ksu.edu](mailto:agrbus@ksu.edu)

NAME: \_\_\_\_\_ POSITION: \_\_\_\_\_

KSU Email: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Department if not Agronomy \_\_\_\_\_  
(other department, list here)

EVENT: \_\_\_\_\_ DESTINATION: \_\_\_\_\_

EVENT DATE (S): \_\_\_\_\_ Departure DATE: \_\_\_\_\_ Return DATE: \_\_\_\_\_

Account # (S): \_\_\_\_\_  
(This is the account number for expense charges)

**\*International Travel must complete International Travel Registration with the Office of Risk and Compliance** <https://www.k-state.edu/risk/responsibility/international/registration.html>

Will you be receiving reimbursement from any other department or an outside source? Y  N   
(Grant, other funding, etc.)

If yes, provide source/department name and contact person: \_\_\_\_\_

**\*\*This form is not an 'Official Approval' for travel\*\***

**Once approved, you will receive an approval email with the Maximum lodging rate, daily Per Diem rate, and Tax Exempt form (if applicable)**

**ESTIMATED EXPECTED TRAVEL COSTS:**

**LODGING:**  
Number of Days: \_\_\_\_\_ ESTIMATED Nightly RATE: \_\_\_\_\_

**Airfare:**  
Costs: \_\_\_\_\_ Departure City: \_\_\_\_\_

**Registration**  
Costs: \_\_\_\_\_

**\*\*\*Average Daily Per Diem Estimate is \$65 per day.**

**Miscellaneous Expenses (Parking, Tolls, etc.):** \_\_\_\_\_

**Name of other KSU travelers:** \_\_\_\_\_  
\_\_\_\_\_

**Traveler's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Department Authorized Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Office Use Only**

Request No: \_\_\_\_\_ Email Sent: \_\_\_\_\_ Tax Status \_\_\_\_\_ Rev. 2023/06