**REQUEST FOR APPROVAL OF COLLEGE**

**SPONSORED STUDENT TRAVEL**

**Name of Organization or Class: **

**Name of Sponsor, Instructor, or College Employee Traveling with Group: **

**Sponsor Phone Contact Information\*: 1.  2.**

**Budget Account Number(s) to Charge: 1) Amount: **

**2) Amount: **

**Explanation and Justification of Trip and Expenses:**

**Destination: **

**Date of Departure:  Date of Return: **

**Activity Attending: **

**Number of Persons Attending: **

**Transportation: Number of Cars:  or Other Transportation: **

**Hotel Accommodations:  Number of Rooms: **

**Meals (estimated): **

**Registration Fees:  persons @ $  per person**

**Miscellaneous Expenses—Itemize:  $ **

** $ **

** $ **

**Advance Payment Requested:   Amount: $ **

**Approved/Authorized LSCS Driver** *(Must be on Approved Drivers List)*:  ****

**Requested By:  Date:  Signature of Sponsor/Instructor/Employee**

**Approved By:  Date:  Signature of Associate Dean or Dean of Instruction\*\***

**Approved:  Date: **

**VPADs/LEO** *(Required for Vehicle Rentals*)

\* At least two contact numbers needed

\*\* Certifies that funds are available.

**Faculty/Sponsor**

**6-3-10-jrm**

**FORM TR1**