**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**