

UNM-LOS ALAMOS INTERNAL TRAVEL REQUEST FORM

SUBMIT PRIOR TO TRIP:

NAME: _____ DATE: _____

ADDRESS: _____ SOCIAL SECURITY #: _____

DEPARTMENT TO BE CHARGED: _____ ACCT #: _____

DESTINATION AND PURPOSE OF TRAVEL:

DEPARTURE DATE: _____ DEPARTURE TIME: _____

DATE OF RETURN: _____ TIME OF RETURN: _____

METHOD OF TRANSPORTATION:

STATE VEHICLE (car or truck): _____

OTHER (if state vehicles are unavailable): _____

ITEMIZED COSTS TO BE INCURRED OTHER THAN PER DIEM (MEAL EXPENSES): E.G.
(REGISTRATION FEES, MEAL COSTS IN EXCESS OF APPROVED PER DIEM RATES, LODGING
EXPENSES, TAXI FARES, PARKING, ETC.)

IF MEALS ARE TO BE PROVIDED AT YOUR CONFERENCE OR MEETING, PLEASE LIST THEM
BELOW: (E.G. BREAKFAST, LUNCH AND/OR DINNER).

**PLEASE NOTE: All Travel Requests Must Be Submitted Prior To Your Trip And Be Approved By
The Following:**

SUPERVISOR: _____ FINANCE DEPARTMENT: _____

CAMPUS DIRECTOR: _____

**PLEASE NOTE: Finance Department Reserves The Right To Refuse Reimbursement If The Above-
Requested Signatures Have Not Been Obtained.**

SUBMIT THIS PRE-APPROVED FORM UPON COMPLETION OF TRIP:

ACTUAL DATE OF DEPARTURE: _____ TIME OF DEPARTURE: _____

ACTUAL DATE OF RETURN: _____ TIME OF RETURN: _____

**NOTE: All receipts for reimbursement (other than per diem but including lodging receipts if
overnight travel is being claimed), should be attached to this form and submitted to the Finance
Office for processing one travel is competed AND no later than 10 days after the return date.**

SIGNATURE OF TRAVELER: _____ DATE: _____