## **Request for Cash Advance for Travel**

(For use by Study Abroad Programs Only)

routed

1. Program Directors

Assistant Director/Coordinator of Study Abroad (A.D.)

2. A.D. Accounts Payable

Accounts Payable A.D.

A.D.

**Accounts Payable issues** 

program director

## **VSU Request for Cash Advance for Travel**

(For use by Study Abroad Programs Only)

Submission Date:					
Applicant:		VSU ID or Last 4 Digits of SSN#:			
Employing Dept/Unit:		Dept Contact:		_ Ext:	
TRAVEL DATA					
Dates of Travel: (From)	(To)	<del></del>			
Program Name and Destination:					
Number of Students (please attach a list or ro	ster of names and VSU	J ID numbers):			
Number of Employees (please attach a list or	roster of names and V	SU ID numbers):			
ESTIMATED COSTS (Do not include prep	aid or personal expens	es in estimated costs.)			
1. Transportation Cost: Air:	Other:	Other:	Total \$		
2. Excursions: (			) \$		
3. Registration Fees:			\$		
4 Hotel and Meals: Hotels:	Meals:		Total \$		
5 Other: (Taxi, Parking, Phone)			\$		

<u>I understand that all documentation and receipts substantiating this advance must be submitted 5 days from trip return date.</u>

<u>Failure to do so will require notification to the System Office under HB1113/malfeasance regulations and consequences may include reprimand or other action.</u>