

**BREVARD COLLEGE
STAFF TRAVEL REQUEST FORM**

Name _____ Department _____

Travel date(s) _____ Destination _____

Purpose of trip _____

Advance? yes no Date due _____ Amount advanced _____ Check no. _____

NOTE: Applicant must submit request for an advance to the Office of Finance by 12:00 p.m. Wednesday, in order for a check to be cut on Friday of that same week.

If a check is advanced, all receipts must be attached to the check stub and returned to the Office of Finance within 5 days of applicant's return.

<u>EXPENDITURES</u>	<u>Amount Requested</u>	<u>Amount Spent</u>
Travel by College car _____ miles	_____	_____
Travel by personal car _____ miles @ \$0.28	_____	_____
Other transportation _____	_____	_____
Parking / tolls _____	_____	_____
Meals _____ @ _____	_____	_____
Lodging _____ nights @ _____	_____	_____
Miscellaneous: _____ _____ _____	_____ _____ _____	_____ _____ _____
Total expenses:	_____	_____

(Note: Registration fee must be processed through the Purchasing Department)

Amount owed to applicant (in excess of advance, or as reimbursement): _____

Amount owed to Brevard College (if expenses are less than amount advanced): _____

SIGNATURES OF APPROVAL

Applicant _____ Date: _____

Department/Division Head _____ Date: _____

ACCOUNT TO BE CHARGED: _____

I hereby authorize Brevard College to withhold from my paycheck the amount of any unauthorized charges or expenditures not supported by appropriate documentation, as determined by the College, for which I have received a cash advance: _____ Date: _____

Employee signature/authorization