

University of Wisconsin-La Crosse
Department of Educational Studies
 TRAVEL FUNDS REQUEST *FORM A*
 (for expenses within allocated travel budget)

Name _____ Date(s) of Travel _____

Organization and Event _____ Location _____

Professional Involvement:

- _____ a. presentation of a paper, solo exhibition, or solo performance
- _____ b. service as an organization officer, board member, conference organizer, or juror
- _____ c. session chair, organizer, panelist, group exhibitor, or group performer
- _____ d. attendee
- _____ e. other (please explain) _____

Other departmental members attending: _____

Will you be sharing resources (lodging, car rental, etc.)? *Please describe briefly:* _____

Cost Estimate (per person): (Refer to UW-System Travel Guidelines, available at: <http://web.uwsa.edu/travel/login/>)

Conference registration: \$ _____
 Auto (check one): *personal* ___ *rental* ___ *fleet* ___ miles _____
 or Airfare public transport _____ \$ _____

Lodging (per person): Number of nights _____ at \$ _____ per night \$ _____

Meals: Number of days _____ at \$ _____ per day \$ _____
 Number of days _____ at \$ _____ per day \$ _____
 Number of days _____ at \$ _____ per day \$ _____

Luggage: Checked baggage fees _____ at \$ _____ round trip \$ _____

Miscellaneous: (please itemize) \$ _____

Total Estimated Cost \$ _____

List other sources of support such as registration waiver, foundation grants, external grants, etc.

Total Supplementary Support \$ _____

Total Request from DES \$ _____

If request is in excess of allocated travel budget, indicate where the balance of the funding will come from:

Record of Action on Request: Approve _____ Disapprove _____

Department Chair _____ Signature _____ Date _____