

Student Travel Request

Date:

Contact Information:

Organization Name:

Contact Person:

E-Mail:

Daytime Phone:

Travel Information:

Destination:

Return Date:

Leave Date:

Purpose of Travel:

Please note that travel reimbursement is subject to Arkansas State Travel Regulations and final processing by the Arkansas Tech Travel Office.
Arkansas Tech University

This form is to be completed by the faculty/staff advisor or the group's contact person. Student travel for any Tech purpose must receive approval. This form must be submitted (3) three days in advance (10 days if a student driver is being used) to the dean of the appropriate college.

Travel Approval

(Faculty/Staff/Advisor Signature)

(Printed Name)

Date

Department Head

Date

Dean

Date

Approved: ☐ YES ☐ NO

Please forward approved form to Travel.