BOSSIER PARISH COMMUNITY COLLEGE

REQUEST FOR OFFICIAL TRAVEL

Instructions: Complete the information requested below, including signatures, and forward to the administrative secretary in the Comptroller's Office. Requests for in-state travel should be submitted two weeks in advance: requests for out-of-state or international travel, four weeks in advance. See Section IX of the *Louisiana Travel Guide* for detailed instructions regarding international travel.

Passengers must each claim their own expenses. Separate requests must be filed. Date: _____

Check One		Check One		Check One			
In-state	_____	Employee	_____	Pers. auto	_____	Plane	_____
Out-of-state	_____	Student	_____	State auto	_____	Other	_____
International	_____	Other	_____				

Account Number ____ ____ ____ ____ ____ ____ - ____ ____ ____ ____

Traveler's Name _____ Title/Position _____

Depart for _____ Date _____ Time _____ a.m./p.m.

Return to _____ Date _____ Time _____ a.m./p.m.

Purpose of travel _____

_____

Personal Vehicle License # _____ Liability Insurance: Yes ____ No ____ Collision Insurance: Yes ____ No ____

List of Faculty/Staff Accompanying You:

_____ _____ _____ _____

NOTE: No state officer or employee may carry unauthorized passengers in state-owned vehicles. If students are participating (athletic contest, academic events, field trips, etc.), a list of names must be filed with the travel request and with your department head.

ESTIMATED COST OF TRAVEL (To be completed by Traveler)	
Mileage: _____ miles @ _____ cents per mile	$
Airfare	$
Lodging	$
Meals	$
Other Expenses (list):	
_____	$
_____	$
Total Estimated Cost	$

CASH ADVANCE OR PREPAYMENT REQUESTED	YES ☐ NO ☐
Cash Advance Made Payable To:	Amount
_____	$
_____	$
_____	$
Comptroller's Office Use: **Cash Advance Account Number**	-1320

1) TRAVEL REQUESTED BY:

_____ _____ _____ _____

Traveler's Signature Date Dept. Head/Division Chair/Director Date

2) APPROVAL RECOMMENDED BY:

_____ _____

Applicable Vice-Chancellor Date

3) APPROVED:

_____ _____

Vice-Chancellor for Finance & Admin. Date

4) BUDGET APPROVAL:

_____ _____

Comptroller's Office Date

White Copy – Comptroller's Office Yellow Copy – Accounts Payable Pink Copy – Approval Copy Green Copy – Traveler's Copy