

Executive Senate Travel Request



Please provide your contact information and information about the conference or program.

Name:	CWID:
Primary Phone:	Email:
Conference/Program:	
Date(s):	Location:

Please provide a summary of all expenses for travel to this conference or program.

Category	Amount
Registration	\$
Airfare	\$
Lodging	\$
Transportation	\$
Mileage Reimbursement	\$
Other (please list):	\$
Total Travel Expenses	\$

Will you be requesting/receiving funding from a CSUF department? **YES** **NO**

If yes, please state 1) how much funding is being requested/has been received, 2) the department the funding is being requested/received from, and 3) if the funding has already been approved/the likelihood that it will be approved:

The requestor acknowledges that if funding from a CSUF department is received, they will need to submit all original receipts to that CSUF department for reimbursement. The requestor further acknowledges that they will complete all required pre-travel documentation before traveling and will, upon return, submit the required conference report to the council financial officer.

Student Requestor Signature Date

Financial Officer Signature Date

Council Advisor Signature Date

For council use only:

Council _____ Account _____ Approved Yes ___ No ___ Amount \$ _____ Date _____