

TRAVEL CHECKLIST

Organization/Group: _____

Date(s) of Trip: _____

Each of the following items must be submitted to the A.S. Office at least Two Weeks prior to the beginning of travel.

- Travel Fund Request Form
 - Contains 2 Valid Signatures
- Travel Questionnaire
- Outline of Expenses
- Agenda, Program or Summary for Conference or Event
- Map of Travel (to indicate mileage if traveling by vehicle)
- Release & Waiver (1 for each person traveling)
 - Number of People Traveling _____
 - Number of Waivers Received _____
- Organization Driver / Insurance Forms (1 for each person driving)
 - Number of People Driving _____
 - Number of Driver Forms Received _____
 - Copy of Driver's License(s)
 - Copy of Insurance Policy(ies)
 - Copy of DMV Record
(Will be obtained by A.S. Office IF form is submitted at least 2 weeks prior to travel)

FOR OFFICE USE ONLY:

ALL Release & Waivers Received: Date _____ Initials _____

ALL Organization Driver Forms Received: Date _____ Initials _____

On-Campus Status Verified

OFFICE SUPERVISOR:

All Forms Received and Complete YES Budget Approved for \$ _____ Date _____

Signed _____ Date _____