



XAVIER UNIVERSITY OF LOUISIANA
 One Drexel Dr.
 New Orleans, LA 70125

TRAVEL REQUISITION FORM

NAME: <i>Last</i> <i>First</i> <i>M.I.</i>				XULA ID:	
ADDRESS: <i>Street</i> <i>City</i> <i>State</i> <i>Zip Code</i>				CAMPUS EXT:	
DESTINATION:				ACCOUNT TO BE CHARGED:	
ORGANIZATION:				FUND	ORGN
PURPOSE/DATE:				ACCT	PROG

Attachments : Please provide responses to the following ...

- Purpose for attending (Attach supporting documents such as acceptance letter for submitted paper.)
- Plans for classes (What classes or other duties will you miss? Tell how you plan to ensure that classes are covered. Provide names of individuals who will replace you, and give any other pertinent details.)
- Travel history (Include information on travel funded by either the University or through grants during the previous and current academic years.)

ESTIMATED EXPENSES & ADVANCES REQUESTED			
	MAKE CHECK PAYABLE TO	DATE NEEDED	AMOUNT
TRANSPORTATION			
REGISTRATION			
ACCOMMODATIONS			
MEALS			
MISCELLANEOUS			
TOTAL REQUESTED			
MAXIMUM APPROVED (if less than requested)			

FOR FISCAL USE ONLY		
EXP	ADV	DATE
Total Exp		Total Adv

All travel funds MUST be accounted for by submission to the Dean's office of an approved EXPENSE REPORT WITHIN ONE WEEK after completion of the trip. Allowable expenses must be supported by ORIGINAL DOCUMENTS, such as airline, railroad or bus tickets, hotel bills, and meals and other receipts for expenditures over five dollars.

Signature of Traveler	Date
Approval of Dept. Chairperson	Date
Approval of Grant/Project Manager	Date
Approval of Dean	Date
Approval of Accounting Dept.	Date