

Department of Psychology Travel Request Form

TO BE SUBMITTED **AT LEAST** THREE WEEKS IN ADVANCE OF TRIP

Section I: General Information		
Traveler Name:	<input type="checkbox"/> Faculty <input type="checkbox"/> Student <input type="checkbox"/> Staff/Post-Doc	
Departure Date/Time:	Return Date/Time:	
Departure City:	Destination City:	
Conference Name:		
Conference Dates:	Are you presenting? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If not attending conference, purpose of trip:		
Section II: Pre-Payment		
Are you requesting pre-payment for:	Airfare?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Lodging?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Registration?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If you want these pre-paid, please provide your preferred itinerary, registration form, and/or lodging preferences</i> Note: Airfare/lodging cannot be prepaid when vacation time is combined with business travel		
Section III: Estimated Expenses		
Airfare:	\$ _____	
Rental Car:	\$ _____	Agency: <input type="checkbox"/> Enterprise <input type="checkbox"/> National
	Justification for Need:	
	Note: DW/CDW/LDW and liability insurance are required	
Personal Auto:	Driving? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Note: Mileage reimbursement is not to exceed cost of least expensive airfare		
Registration	\$ _____	
Per Diem:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Hotel:	\$ _____	Is a conference rate available? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Note: Not to exceed either the conference rate or 1.5 times the federal rate for travel location	
	Are you sharing the hotel cost with anyone else? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, please provide name(s)/affiliation(s):	
Other:	Taxi/Subway/Bus: \$ _____	Tolls: \$ _____
	Parking: \$ _____	Miscellaneous: \$ _____
Additional Notes:		
Section IV: Funding		
Funds (enter desired chartfield):		

Faculty: To use department travel funds, please included proof of presentation

Students: Please provide funding approval documentation from your faculty advisor

Please submit completed form with necessary documentation to the main office (PS 225) or via email to psych.service@osu.edu at least two weeks prior to trip departure.