



**WILLIAM
& MARY**
CHARTERED 1693

**FACILITIES
MANAGEMENT**

****Please attach the following: description of license or membership renewal/bill or training/conference description, agenda and/or schedule and registration information. Request should be completed 30 days in advance.****

TRAVEL/TRAINING/CONFERENCE/PROFESSIONAL LICENSING/MEMBERSHIP

Employee Name: _____ Date: _____

Employee 93 #: _____

Index: _____ Supervisor Initials _____

Director Signature _____ Date _____

CFO Signature _____ Date _____

Description of Training/Conference/Professional Licensing: _____

Fee: _____

Location: _____

Travel Required? NO YES

Travel Dates: _____ Mileage only? NO YES

Overnight stay required? NO YES Travel Advance Requested? NO YES

Rental car required? NO YES Driver's License #/State _____

SPECIAL INSTRUCTIONS: _____

TRAVEL DELEGATE USE ONLY

Pre-Approval entered: _____

Registration Completed: _____

Paid by: _____

Check the following once completed:

____ Airfare

____ Rental Car

____ Per diem info. sent to traveler

Travel Advance

Promissory Note Signed? _____

Request Entered: _____