Student Travel Registration Form

This form must be completed and returned to 230 HUB prior to any individual student travel or student organization-sponsored travel that is utilizing UPAC funding or funds from an ASA account. If you fail to complete this form thoroughly and accurately prior to travel, you and/or your student organization will not be reimbursed for travel expenses.

Name (*primary contact*): _____

Student Organization (if applicable): _____

Student ID Number:_____ Cell Phone:_____ Email:_____

Travel Dates: _____ Destination(s):_____

Reason for Travel:_____

_____

Mode of Transportation: ☐ Air ☐ Bus ☐ Train ☐ Rental Car ☐ Personal Vehicle/Fleet Vehicle

Number of Students Traveling: _____ Are you requesting UPAC Funding? Yes or No

*****A DETAILED TRAVEL ITINERARY CONTAINING INFORMATION ABOUT YOUR TRANSPORTATION SUCH AS MODE OF TRANSPORTATION, FLIGHT NUMBERS, TRAVEL TIME, ETC. MUST BE ATTACHED FOR TRAVELERS*****

A COMPLETED TRAVEL REGISTRATION FORM MUST BE SUBMITTED THREE ACADEMIC DAYS PRIOR TO TRAVEL. ONCE THE FORM IS SUBMITTED, PLEASE COMMUNICATE ANY CHANGES IMMEDIATELY.

The information below is required for each traveler. The emergency contact on file will be contacted in the event of an emergency. Emergency contact information can be updated on eLion.

Name of Traveler	Student ID	UserID (xyz111)

For additional travelers, please attach an additional sheet with the required information for each person.

Office Use Only

__ Detailed itinerary received for each traveler

__ Required information received for each traveler

_____

Staff Signature Date

**Do not sign until all required information is received*