

Virginia Tech
Department of Chemistry
Travel Reimbursement Form

Attach this form with all receipts requesting reimbursement.

Date of Submission: _____ Name: _____

Phone: _____ Email: _____

Faculty Staff Student Guest Other _____

Fund Number (if multiple funds involved explain split): _____ Activity Code (if applicable): _____

Travel Grant Involved (provide documentation)

Type of Trip & Dates of Travel

National Travel International Travel Travel Authorization Number (Required): _____

Travel Location(s) (Include City/State/Zip code): _____

Dates of Travel (if multiple locations include the dates and location associated): _____

Purpose of Trip

Conference Business Meeting Research Other _____

If Conference, please provide: Registration Fee Amount: _____

Agenda (provide print out or link): _____

Students – Presentation Title: _____

Lodging

Purchased hotel Split costs hotel Provided hotel Lodging not needed (day trip)

Lodging choice explanation:

Student Lodging:

Lodging Hotel Room # _____ Nearest Police Station _____

Food

Per Diem Meal Rates:

Breakfast _____

Lunch _____

Dinner _____

Non-Per Diem Meal (attach food receipts):

Breakfast _____

Lunch _____

Dinner _____

Provided Meal (hotel breakfast, meal provided by conference, etc.):

Breakfast _____

Lunch _____

Dinner _____

No Meals Necessary

Business Meals:

Transportation

Personal Car (provide addresses of coming from and going to): _____

Shuttle Bus _____ Rental Car _____ Uber _____ Lyft _____

Misc Taxi _____ Fleet Services _____ Other Transportation _____

Airfare (Provide explanation of choice below):

Roanoke:

Not Roanoke (Provide cost comparison):

Travel Associated Costs

Parking _____ Tolls _____ Gas _____

Baggage _____ International Travel Insurance _____ Change Fee (requires explanation): _____

Printing _____ Shipping _____ Other _____