

# The Edward R. Murrow College of Communication

## Request for Travel

Please fill in ALL blanks, and circle Y or N

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### Personal Information:

Name: \_\_\_\_\_ WSU ID#: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

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### Dates of Travel:

Departure Date: \_\_\_\_\_ Time: \_\_\_\_\_ Return Date: \_\_\_\_\_ Time: \_\_\_\_\_

Destination City/State: \_\_\_\_\_

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### Event:

Event Name/Dates: \_\_\_\_\_

Are you an officer at this event? **Y** or **N** Presenting a paper? **Y** or **N** (If **Y**, provide title of paper below)

Title of Paper: \_\_\_\_\_

Accommodation Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Does this trip benefit the College of Communication? **Y** or **N**

If so, how?: \_\_\_\_\_

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### Expenditure Estimates:

Lodging: **Y** or **N** Number of nights: \_\_\_\_\_ Cost: \_\_\_\_\_ Airfare: \_\_\_\_\_

Rental Car: **Y** or **N** Cost: \_\_\_\_\_ **or** Personal car mileage: \_\_\_\_\_

**Meals** or **Per Diem** (please circle one) cost: \_\_\_\_\_ Registration cost: \_\_\_\_\_

Miscellaneous (description): \_\_\_\_\_ **Total cost:**  
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: If WSU is to pay for your registration in advance, please provide a completed registration form. :  
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### For Office Use Only:

Budget coding: \_\_\_\_\_ TA#: \_\_\_\_\_ Chair's Approval: **Y** or **N** Allowance: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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