

Department of Gender, Sexuality, and Women's Studies

1. Traveler Name _____ Traveler UFID# _____
2. Is this travel to present at a conference/organization? Yes _____ No _____
 - a. If yes, title of conference/organization, title of presentation. Attach presentation information/acceptance. If no, provide detailed description of the purpose of your trip and attach any supporting documents.
3. What are the benefits of this trip to the Center, College, and UF?
4. Identify Funding. If you are requesting Center travel funds, how much of this fiscal year's allowance have you spent?
5. Primary Destination: _____
6. Departure date/ time: _____ Departure Airport: _____
7. Return date/time _____ Return Airport: _____
8. If you use your own vehicle, how many total miles do you think you will incur?
9. Lodging: _____ Number of nights: _____ Cost per night: _____
 - a. *If you are sharing a room, please have the hotel desk note the single rate for your stay on your hotel bill. Note: it must indicate single rate. UF will only pay for **your** charges.*
10. How many days will you need meals? _____
 - a. *Meals are determined by per diem in the US: \$36 (\$6 breakfast, \$11 lunch, \$19 dinner) Foreign meals are GSA rate.*

V R R F

Itemize your estimated expenses:

Airfare	
Lodging	
Rental Car	
Taxi/Shuttle	
Meals	
Mileage/Parking/Tolls	
Registration	
Misc./ Other (please explain)	
Total	

Mileage = \$0.445 per mile

Department Chair's Approval: _____ Date: _____
 Please submit your _____ k _____ 7 detailed itinerary and all receipts (except food) as soon as possible, **but not more than 4 weeks**, after returning.

If expense reimbursements are not submitted and approved within the 60 day limit, the amount ultimately paid to the employee will be included in the employee's annual W-2 as taxable income.