

MU LIBRARIES REQUEST FOR TRAVEL/RELEASED TIME

Date of Request	Date of Departure for Meeting	Date of Return from Meeting	Date of Return to Work

Your Name:		# of Leave Days Requested:	
Destination (place):		Librarian / Archivist/ Staff:	
Purpose:			

Registration (select one)	
	Will you register and pay for registration yourself?
	Do you prefer that the Library Administrative Office register and pay for you? (Attach registration info.)

ESTIMATED COSTS:		APPROVALS:	
Transportation		Department Head	
Personal vehicle of miles x		# of Days Release Time Granted	
UMC / Rental Vehicle		Amount of Financial Support	
Airfare		Signature: _____	
Shuttle to Airport		Date: _____	
Airport Bus/Taxi		Division Head	
Airport Parking		Administrative Funding?	Yes No
Hotel Parking		# of Days Release Time Granted	
Lodging		Amount of Financial Support	
Total Per Diem for Meals* <small>Meals on first and last days of overnight trip: The daily per diem amount to be reimbursed on trips with overnight travel will be determined by the number of hours in travel status for the day, as follows: Less than 8 hours = not eligible, Between 8-12 hours = 50% of applicable per diem, 12 hours or more = 100% of applicable per diem.</small>		Signature: _____	
		Date: _____	
Registration		MU Libraries Fiscal Office	
Other		Amount of Financial Support	
Total Estimated Cost		Signature: _____	
Amount You Are Requesting		Date: _____	

UM Travel Policy: https://www.umsystem.edu/ums/policies/finance/allowable_travel_expenses

UM Meals Per Deim Policy: https://www.umsystem.edu/oei/sharedservices/apss/travel_and_expense/per_diem_information

Justification for Administrative Funding

Department Head Comments (optional)	Division Head Comments (optional)

For Admin. use: Requester's travel fund balance prior to this request: _____