

Travel Request Form



Note: The purpose of this form is to request approval for travel that is to be funded by CUASA. This form should not be used for events funded by CAUT/OCUFA or others.

TRAVELLER DETAILS

Name: _____ Position: _____

Email: _____ Phone: _____

TRAVEL INFORMATION

Approx. travel date: _____ Approx. return date: _____

Travel destination: _____

Purpose of the trip (please elaborate on why it's essential and why CUASA should fund this):

Estimated cost of trip (please provide as much information as possible, including anticipated travel method, accommodation costs, whether a per diem is required)

Traveller signature:

Date:

Office use only:

Office notes (if applicable):

Approved (yes/no): _____

Approved by: _____

Signature: _____