## AIR TRAVEL REQUEST \*

Procedure No. 602.4 – Supplem	ent 3
NAME	EXT
DATE	
BUDGET NO. TO BE CHARGED	)
BUDGET LIMIT \$	EXT
TRIP DESTINATION	
PURPOSE	
DEPART FROM	
RETURN TO	
DATE LEAVING	
DATE RETURNING	
* Attach copy of agenda/registra i.e. conference data.	tion form or explanation memo,
Signature of Traveler	Associate Dean (where applicable)
Dean	Date

## AIR TRAVEL REQUEST PROCEDURES:

1. **NO** airline tickets may be ordered until this form is completed and signed, with appropriate budgetary approvals.

2. Upon receipt by the appropriate dean's office, tickets will be ordered from college travel agency(ies). Please provide as much information as possible, especially special conference

## rates.\*\*

3. All tickets will be mailed to the appropriate Dean's office and you will be notified when they arrive, unless approval is given for other arrangements.

4. The cost of the tickets ordered on the college American Express card will be back-charged to your department/division budget. Please notify your area supervisor of any changes in your flight plans.

5. All other travel arrangements must be made by using the appropriate forms and procedures as set by policy, unless otherwise authorized.

## **\*\*NOTE:** If detailed flight information is required, it may be suggested that the traveler speak directly with the travel agent before tickets are finalized.

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