

# Complimentary Travel Form

This is a complimentary travel form for NSCM use. This form should be completed and submitted to the NSCM Director, even if there is no cost to the University. This form provides a record to be kept on file for all official travel.

Prepared by:

Date:

PID:

First, MI, Last Name of Traveler:

Traveler's Office Location:

Home Address:

Is traveler a U.S. Citizen? Yes

No

Is traveler an employee of UCF: Yes

No

Building Name/Room#:

Phone Number:

Desination:

Dates Away from Campus:

Purpose of Trip:

Benefit to the University:

Will UCF be incurring any costs? Yes\*

No

List ALL missed obligations as a result of this travel (i.e. Class sessions, office hours, meetings, etc.)

Please explain for each instance, how these obligations will be covered or made up.

***\*If yes, please complete a travel requisition followed by a reimbursement voucher.***

Traveler's Printed Name/Signature/Title/Date:

Supervisor's Printed Name/Signature/Title/Date: