

MOB STUDENT TRAVEL EXPENSE WORKSHEET

Complete and submit to MOB Coordinator for use in T-Auth preparation no later than 5 days before travel or 25 days before travel for cash advance request. T-Auth must be created BEFORE travel begins.

TRAVELER: _____ Employee ID# _____

Budget # _____ Supervisor _____ Signature _____
(Budget to be charged if using funds other than MOB; if only using MOB and COGS travel funds you can leave blank)

Date application made for COGS Grant _____ **REQUIRED** Link to online application is on IMB website.
Must be submitted no later than 10 days before travel starts.

Traveler Mailing Address, with zipcode: _____

Telephone _____ E-mail address: _____

Depart from: _____ Destination(s): _____

Date & est. Time of departure: _____ Date & est. Time of return: _____

Purpose of Trip (with name of meeting/conference – No acronyms):

Presenting a Paper or Poster? ___ No ___ Yes

Is any non-business travel time included? Please explain.

ESTIMATE YOUR TRAVEL EXPENSES:

Airfare: \$ _____ Airline: _____ Ground Travel (bus, taxi): \$ _____

Rental Car (Enterprise/National*): \$ _____ Personal Vehicle: _____ miles @ 44.5¢ mile = \$ _____

Lodging: \$ _____ Meals**: \$ _____ **OR** Per Diem*** ONLY: \$ _____

Registration: \$ _____ Miscellaneous: \$ _____ **TOTAL ESTIMATE:** \$ _____

Will you split expenses with another traveler? If so, name(s) and details:

Additional Information:

Receipts for hotel, airfare, gas, registration, parking, etc. must be submitted within 3 days of return.

*FSU has a contract with Enterprise/National, which includes insurance. All rentals should be through Enterprise/National unless circumstances are very unusual.

** Meals will not be reimbursed by receipt. There is a set meal allowance: Breakfast (\$6) when travel begins before 6 am and extends beyond 8 am; Lunch (\$11) when travel begins before 12 noon and extends beyond 2 pm; Dinner (\$19) when travel begins before 6 pm and extends beyond 8 pm.

***Per Diem is reimbursed at \$20 per quarter day or \$80 if traveling for the entire day. No lodging may be claimed if using Per Diem.

===== PLEASE DO NOT WRITE BELOW THIS LINE =====

Submitted by: _____ Date: _____

Approved: _____ Date: _____
Director of IMB, MOB or Designee Signature

Budget Number: _____