Submit this form at least 3 weeks prior to travel

(check one) School Related/Faculty Development _____ Personal

from to _____

(If "yes," please complete Travel Budget Request below; subject to approval by Director)

(check one): *reimbursed by department)*

[ ] Sunflower travel (direct bill to school)

[ ] Traveler purchasing tickets elsewhere,
to be reimbursed.
(attach two quotes if not using Sunflower)

for using Supplemental rarely

Click Submit or email completed form to: stacy.salters@wichita.edu

Clear Print Submit & Email

Budget Officer Approval Date

Org _____ Fund _____ Amount_____

Notes: _____