

College of the Redwoods Travel Request Authorization

PURCHASING MUST RECEIVE THIS FORM 21
DAYS PRIOR TO THE TRAVEL DATE

Please complete this form with your manager prior to booking any travel for trainings, meetings, and conferences. Send the form through Adobe Sign Signature process, then to travel@redwoods.edu, or cc travel@redwoods.edu through Adobe Sign.

Name: _____ Employee ID: _____

Department: _____

Name of Event: _____

Location of Event: _____

Date(s) of Event: _____

Estimated Total Cost of Trip: \$ _____

Reason for Attending:

Method Of Travel: (Must Choose One)

- | | |
|--------------------------------|---|
| <input type="checkbox"/> Air | <input type="checkbox"/> Rental Vehicle |
| <input type="checkbox"/> Bus | <input type="checkbox"/> Personal Vehicle |
| <input type="checkbox"/> Train | <input type="checkbox"/> Other _____ |

*** Note to employee and supervisor to review travel cost for most economical method of travel.

Signature: _____ Date: _____

APPROVED BY:

Manager: _____ Signature: _____ Date: _____

Senior Staff: _____ Signature: _____ Date: _____

President: _____ Signature: _____ Date: _____
(out-of-state travel only)

*Travel outside of the country requires Board Approval prior to travel.

BUDGET AVAILABLE YES NO GL Number