

Student Travel Process

September 12, 2024



Agenda

- Day Travel
 - Day Travel Expense Form
- Overnight Travel
 - Domestic Travel Request Form
 - International Travel Request Form
- Travel Expense
 - Travel Expense Form
 - Proof of Payment Examples
 - Expense Report Tips
 - Payment Methods
- Students Traveling with Employees
- Payment Methods
- Chat with Travel
- Contact Information



Day travel does not require a pre-approved travel request — no encumbrance # needed

Day Travel Expense Form

Note: If you do not have a Banner ID, please go through the Vendor Portal to set up the individual to receive a payment from Accounts Payable.



Day Travel Expense

ACCOUNTS PAYABLE Section 1: This form can be used for: Processing payments & reimbursements for non-overnight travel expenses and other miscellaneous expenses such as: mileage, candidate travel, non-employee travel, group Section 2: Type of Payment (please check appropriate box that applies) ☐ Student / Non-Employee Reimbursement □ Candidate Reimbursement ■ Vendor Payment Section 3: Make Check Payable to: Banner ID #: Payment to: Email: Phone #: Mailing Address: City: State: Zip Code: Admin. Asst.: Admin. Asst. Banner ID #: Admin. Asst. Phone: Department Name: Dept. Building: Section 4: Day Travel Expenses (For more information please visit: Travel Policy) Reason for Day Travel Mileage Departure Address Arrival Address Mileage Line Total(s) Description/Notes Reimbursemen \$ 0.000 \$ 0.000 .655 \$ 0.000 \$ 0.000 .655 \$ 0.000 \$ 0.000 .655 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 .655 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 \$ 0.000 Sub Total: \$ 0.000 \$ 0.00 Section 5: Accounting Information (Account # 7215 for mileage expenses. Account # 7216 for all other travel expenses and employee travel. Account # 7217 for Student travel.) Section 6: Signature & Consent (Completed & Signed form must be submitted within 45 days of travel exp This is a true and accurate accounting of expenses incurred to accomplish official business for Rowan University and there are no expenses claimed reimbursable which relate to personal or unallowable expense. Please attach original itemized receipts along with mileage maps calculating the shortest route available.

All mileage accounted for does not include the normal daily commute. The mileage on this form was calculated using the SHORTEST ROUTE AVAILABLE. At the time of the expense the vehicle I was using for Rowan University was covered by Liability Insurance. have not received, nor will I receive, reimbursement from any other source (s) for the expense claimed. In the event of overpayment or if payment is received from another source for any portion of the expenses laimed, I assume responsibility for repaying Rowan University in full for those exper Section 7: Appropriate Approvals (Print and Sign) Department Head/Dean: Grants: Accounts Payable:



Day Expense Form

- To be submitted within 45 days after the monthly travel has occurred, if reimbursement is required
 - Approvals Needed
 - Department Head/Dean
 - Grants, if applicable
 - Accounts Payable



Accounts Payable

- Mileage- include a copy of Google map showing the mileage calculation
 - Utilize the physical street address
 - ex. 2000 Clements Bridge Rd Deptford, NJ instead of Deptford, NJ
 - Mileage is reimbursed in lieu of fuel
- Uber & Lyft include the destination address (ex. to conference or event site)
- Receipt/Order Confirmation showing what was purchased (ex. registration, parking, tolls) & the amount
- Proof of payment = credit card statement or copy of the credit card that matches the last 4 digits shown on the
 receipt
- Meals are not permitted with day travel, unless specified by the Grant funding the expense



Overnight Travel

All overnight travel requires a pre-approved travel request – encumbrance # needed

Domestic Travel Request Form



Student Domestic Travel Request

^^ For AP use Only ^^					
Encumbrance No.					

Section 1 - Purpose							
Students authorized to t	ravel overnight on offici	al Rowan University bu	siness.				
Section 2 - Traveler's l	Information						
Date:		Title:		Ban	ner ID#		
Traveler's Name:	Email:		Pho	ne #:			
Mailing Address:		City:		State	e:	Zip Code:	
				A	dmin. A	sst. Phone:	
Admin. Asst. Email:		Dept. Name:					
Section 3 - Destination							
	e:						
Conference Dates:		Reas	on for Travel				
	employees on the same r						
	TION REQUIRED: Please includ Fravel Expenses (For n				n, or inform	ation printed from a website.	
Date	1 1		tion of Estima		(In Deta	il)	F-1
From To	Items	(Examples: Airline)					Estimated Co
	~						
	~						
	~						
	~						
	~						
	Mileage				Miles	@ .67	0.0
Please note: Meals included a Federal Domestic: US per die	s a part of the registration fee m. rates	will be deducted from the per	diem payment.		Estimat	ed Travel Expenses	0.0
IRS: Standard Mileage Rates						,	
	onsent (Print and Sign)						
I hereby certify that this trave traveling on official Rowan U	I request is an estimate of expensiversity Business.	enses that will be incurred whi	le traveling on off	icial Rowan U	hiversity.	Business and is being sul	mitted prior to
Traveler Signature:	, , , , , , , , , , , , , , , , , , , ,		Date:		Amo	ount Requested:	
Section 6 - Accounting	Information						
Index #	Fund #	Organization#	A	ccount#		Program #	Amount
					~		
					~		
					~		
Account # 7215 is used for ma	ileage expense. aployee travel and all other tra	ural armana as farramala; talle	Aj	pproved A	mount t	o be Encumbered:	S 0.0
	. Account # 7217 is used for s		parking,			'	
Section 7 - Appropriat	e Approvals (Print and	l Sign)					
Department Head:			Date:		Amoun	t Approved:	
Grants:			Date:			Funds Availab	ole:
Accounts Payable:			Date:				

Revised: 1-1-2024



Domestic Travel Request

- To be <u>submitted & approved</u> at least 4 weeks prior to the departure date
 - Approvals needed
 - Department Head
 - Division Head
 - Grants, if applicable
 - Accounts Payable
- Include all travel expenses, but list expenses that will be charged to a Pcard or paid via PO as \$0 so that those amounts are not included in the encumbrance



Grants, if applicable

- Check grant budget for allowability and to make sure there are enough funds in the account to cover expenses (OK to approve if enough money in pooled accounts)
- Do budget transfer if requested by department
- Check to make sure there is documentation supporting the request
- Check to make sure form has required signatures (Post award signatures include Post award specialist and either Lisa Ciliberto or Rita Piccioni)
- Send signed form to A/P for processing



Accounts Payable

- One request per student
- Conference Brochure/Flyer/Website screenshot with the start & end date of the conference as well as the location of the travel
- Hotel Name & Address Information
- Copy of Per Diem screenshot obtained from <u>U.S. Department of State Lodging and Food Per Diem Rates</u>
- Signed Rowan University Release and Waiver

International Travel Request Form

Note: Section 3 of this
form was recently
updated. Please ensure
updated the most
you are utilizing the most
up to date version from
the Accounts Payable
webpage.



Student International Travel Request

^^ For AP use Only ^^						
	Encumbrance No.	1				
E						

Section 1 - Purpose Students authorized to te	avel internationally o	n official Rowan Univers	oite business			
Section 2 - Traveler's In		ni otriciai Rowan Oniver	sity business.			
Date:	normation	Tielo	-	Donnor ID é	į.	
			I			
Traveler's Name:					ate: Zip Code:	
Mailing Address:						
Admin. Asst.:			er ID #:			
Admin. Asst. Email:		Dept. Name:	I	Dept. Buildi	ing:	
Section 3 - Destination,	Purpose & Require	ements				
Destination City & Coun	try:	D	epartment of State Travel	Advisory	RISK LEVEL:	
Conference/Activity Nan	ne:	C	onference/Activity Dates	:		
Reason for Travel:		Export Contro	CITI Training and Inter	national Tra	avel Checklist mus	t be completed.
If Reason for Travel is "C	Other" contact econ		ificate and Checklist with Trave			everent
		omplete the checklist and		quirements	war to exempt. II	exempt,
I acknowledge that I have	e read and agree to th	ne policies and procedure	s of the International Tra	vel Policy a	nd Guidelines.	
Federally funded Interna	tional Travel: please	review OSP Fly America	a Act Procedures			
Section 4 - Estimated T	ravel Expenses		information please visi			
Date	Items	Descr.	iption of Estimated Trave Name, Hotel name, Conference	el (In Detail	Por Diom)	Estimated Cost
From To	-	(i.ximpres. rennic	Transc, Foots mine, Contesent	e, regimina	i, rei Diem)	
		•				
	- 					
	*					
	-	+				
	-	•				
	Mileage			Miles	@ 0.67	0.00
Please note: Meals included as Foreign Per Diem Rates: Foreign		fee will be deducted from the p	er diem payment.	Estimate	d Travel Expenses	0.00
Section 5 - Traveler Co			sts must be approved 4			
Dorolo certify that				•	_	
	al Travel Policy and Guidelines.	velling on official Rowan University Busi have reviewed the OSP Ply America Act				s anno sesso seso agree to tra-
Traveler Signature:			Date:	Amou	ınt Requested:	
Section 6 - Accounting					***	
Index #	Fund #	Organization #	Account #	*	Program #	Amount
				*		
				•		
Account # 7215 in tend for realizings exposes. Account # 7216 in tend for employes travel and all other travel expenses (example totle, parking, registration, hotal and airfure). Approved Amount to be Encumbered: \$ 0.00 Approved Amount to the Encumbered.						
Section 7 - Appropriate	Approvals (Print a	nd Sign)				
Department Head: Date: Amount Approved:						
Division: Date: Amount Approved:						
Study Abroad Office (Approval is required for students):						
Export Control: Date:						
Grants:			Date:	_		
Accounts Payable:Date						
Demissol 1 1 2021						

rvised: 1-1-2024



International Travel Request

- To be <u>submitted & approved</u> at least **4 weeks** prior to the departure date
 - Approvals needed
 - Department Head
 - Division Head
 - Study Abroad Office (student travel only)
 - Export Control
 - Grants, if applicable
 - Accounts Payable
- Include all travel expenses, but list expenses that will be charged to a Pcard or paid via PO as \$0 so that those amounts are not included in the encumbrance



Study Abroad Office

Approval given:

Department of State Travel Advisory

- Level 1: Exercise normal precautions travel permitted
- Level 2: Exercise increased caution travel permitted
- Level 3: Reconsider travel travel unlikely, but MAY be permitted with further approval from Provost
- Level 4: Do not travel travel *not* permitted



Export Control

Complete Export Control requirements before submitting travel paperwork.

<u>Section 3 - Destination, Purpose & Requirements</u>

Reason for Travel (research, conference, teaching, other)

- International Travel Checklist
- CITI Program Export Controls Course

Attach travel checklist and CITI certificate to travel request

If Reason for Travel is "other" (athletic conference, performing services abroad, study abroad, etc.), contact econtrols@rowan.edu to determine if Export Control training and checklist is required. *If determined exempt, faculty/staff supervising the students will complete the travel checklist and CITI training.



International Travel Request

** For AP use Only **					
Г	Encumbrance No.				
E					

Section 1 - Purpose						
	taff, students and o	thers authorized to travel inter	mationally on official Row	an University business.		
Section 2 - Traveler'	s Information		_			
Date:		Title:	Bi	anner ID #:		
Traveler's Name:		Email:	Pi	none #:		
		City:				
Admin. Asst.:		Admin. Asst. Bann	er ID #:A	dmin. Asst. Phone:		
Admin. Asst. Email:		Dept. Name:	D	ept. Building:		
Section 3 - Destination	on, Purpose & Re	quirements				
Destination City & Co	ountry:	<u>D</u>	epartment of State Travel	Advisory RISK LEVEL:		
Conference/Activity N	Name:	c	onference/Activity Dates:			
Reason for Travel:			CITI Training and Internificate and Checklist with Travel	ational Travel Checklist mus	t be completed.	
If Reason for Travel is	s "Other", contact	econtrols@rowan.edu to deter			exempt,	
faculty/staff supervisi	ng the student(s) w	ill complete the checklist and	training.	•		
-		to the policies and procedure		el Policy and Guidelines.		
		lease review OSP Fly Americ				
Section 4 - Estimated Date	1 Travel Expenses		information please visit:		T	
From To	Items		iption of Estimated Travel Name, Hotel name, Conference,		Estimated Cost	
	Mileage			Miles @ 0.655	0.000	
		ation fee will be deducted from the p IRS: Standard Mileage Rates	er diem payment.	Estimated Travel Expenses	0.000	
Section 5 - Traveler	Consent (Print an	d Sign) Travel Reque	sts must be approved 4 w	eeks prior to departure.		
This travel request is an estimate of a	expenses that will be incurred v	shile travelling on official Rowan University Busi elines. I have reviewed the OSP Fly America Act	ness. I understand the Department of State 1	Travel Advisory risk level. I acknowledge that	I have read and agree to the	
Traveler Signature:				Amount Requested:		
Section 6 - Accounting	ng Information					
Index #	Fund #	Organization #	Account #	Program #	Amount	
Account # 7215 is used for mileage	expense.		Approved A	mount to be Encumbered:	S 0.00	
		enses (example: tolls, parking, registration, hotel :	nearae).			
Section 7 - Appropri						
Department Head:	Department Head: Date: Amount Approved:					
Division:	Division: Date:Amount Approved:					
Study Abroad Office (Approval is required for students):						
Export Control:	Export Control:Date:					
Ethics Liaison Officer	Ethics Liaison Officer: Date: Grants: Date:					
1	Accounts Payable: Date					



Grants, if applicable

- Receive international request form from Research Compliance (Priscilla Lyons)
- Check grant budget for allowability and to make sure there are enough funds in the account to cover expenses (OK to approve if enough money in pooled accounts)
- Do budget transfer if requested by department
- Check to make sure there is documentation supporting the request
- Check to make sure form has required signatures (Sarah Piddington signs under Export Controls/Post Award Specialist signs under Grants)
- Send signed form back to Priscilla Lyons for processing



Accounts Payable

- One request per student
- Conference Brochure/Flyer/Website screenshot with the start & end date of the conference as well as the location of the travel
- Hotel Name & Address Information
- Copy of Per Diem screenshot obtained from <u>U.S. Department of State Lodging and Food Per Diem Rates</u>
- Signed Rowan University Release and Waiver



Travel Expense

If reimbursement is required





Student Travel Expense

**	For AP	Use Only	**
	Banner	Invoice #	

	orm is used to pr stic and Internati		oursements i	for overnight travel once	the offic	ial University bu	isiness has
Date:				Encumbrance No.:			
Traveler's Name:				Banner ID #:			
				Apt/Unit:			
				Department Name:			
1							
(City & State)	n:			Dates of Travel:			
Conference Name	e:			Purpose of Trip:			
Section 2: Descri	iption of Expense	s (For more informat	ion please v	isit: Travel Policy)			
Date(s)	Items		ription of Exper me, Conference	se (In Detail) 2, Registration, Airline name)	Miles	2024 IRS Mileage Rate	Line Totals(s)
	~			,,		.67	
	~					.67	
	~					.67	
	~					.67	
	•					.67	
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	~					.67	
		registration fee are deducted : Foreign per diem Rates	from the per di			Grand Total:	0.00
						emized receipts)	
Section 3: Accou Index #	Int Information (4 Fund #	Organization #	Account # 7216 for	all other travel expenses and employee Account #	Progran		d Amount \$
maex #	runa #	Organization #		Account #	riogran	1 # Approve	d Amount \$
				*			
			t	~			
Section 4: Signat	ture & Consent (Fravel Expense form	must be sub	mitted within 10 busine	ss days at	ter travel was co	mpleted.)
I hereby certify that		nses indicated hereon, wh		o accomplish official busine			
Traveler Signatur		ansove.		D	ate:		
Section 5: Appre	opriate Approval	s (Print and Sign)					
		(Г	ate:		
Grants:					ate:		
Accounts Payable	b:				ate:		

Revised: 1-1-2024



Travel Expense

- To be submitted **10 days** after the travel has occurred
 - Approvals needed
 - Department Head/Dean
 - Grants, if applicable
 - Accounts Payable



Grants, if applicable

- Check grant budget for allowability and to make sure there are enough funds in the account to cover expenses (OK to approve if enough money in pooled accounts)
- Do budget transfer if requested by department
- Check to make sure all supporting documentation/receipts are attached
- Check to make sure proof of payment is included if applicable
- Check to make sure form has required signatures (Post award signatures include Post award specialist and either Lisa Ciliberto or Rita Piccioni)
- Send signed form to A/P for processing



Accounts Payable

- Receipt/Order Confirmation showing what was purchased & the amount
- Proof of payment = credit card statement or copy of the credit card that matches the last 4 digits shown on the
 receipt
- Mileage- include a copy of Google map showing the mileage calculation
 - Utilize the physical street address
 - ex. 2000 Clements Bridge Rd Deptford, NJ instead of Deptford, NJ
 - Mileage is reimbursed in lieu of fuel
- Uber & Lyft include the destination address (ex. to hotel, conference or airport)
- Hotel- include folio or receipt that shows the full breakdown of the charge as well as the dates
- Airfare- include receipt that shows airfare class
 - travel insurance not reimbursable
- Utilize <u>U.S. Department of State Lodging and Food Per Diem Rates</u> to calculate per diem & include printout
 - include conference agenda showing any meals provided

Proof of Payment Example

Itemized Receipt with CC Info Listed

Dos Amigos Restaurant New York, NY	
SALE	
12-12-2014 10:32 AM Batch #:04A2A APPR CODE:3A6CE Trace: 9 VISA **** 1245 1 Tacos Del Mal Shrimp 1 Especial Salad Chicken 1 Fountain Beverage	14.98 12.50 1.99
Sub-total: Sales Tax: Total: TIP: TOTAL:	29.47 2.50 31.97
APPROVED THANK YOU CUSTOMER COPY	

Credit Card with matching 4 digits



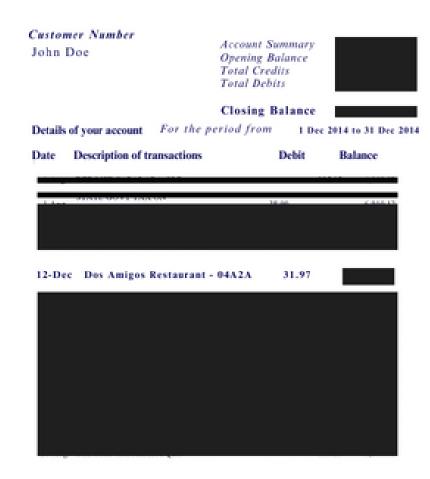
Proof of Payment Example

Itemized Receipt without CC Info Listed

Dos Amigos Restaurant New York, NY	
SALE	
12-12-2014 10:32 AM Batch #:04A2A APPR CODE:3A6CE Trace: 9 1 Tacos Del Mal Shrimp 1 Especial Salad Chicken 1 Fountain Beverage	14.98 12.50 1.99
Sub-total: Sales Tax: Total: TIP: TOTAL:	29.47 2.50 31.97
APPROVED THANK YOU CUSTOMER COPY	

Redacted bank statement showing the charge & the name of the individual being reimbursed

EXAMPLE BANK STATEMENT



Expense Report Tips

EXPENSE REPORT TIPS



AIRFARE OR TRAIN





- Receipt should show that Economy/Coach Class was purchased
- Proof of payment needs to be present credit card statement or copy of the credit card that matches the last 4 digits shown on the airfare receipt
- Main Cabin Extra, Preferred Seating, Delta Comfort, Extra Leg Room, American Airline: Paid Seat is not reimbursable & cannot be included in the total amount being reimbursed



BAGGAGE

- Proof of payment needs to be present credit card statement or copy of the credit card that matches the last 4 digits shown on the baggage receipt
- An excessive baggage fee charged due to personal property needs to be deducted from the expense report

HOTEL



- Itemized hotel folio needs to be attached
- Proof of payment needs to be present credit card statement or copy of the credit card that matches the last 4 digits shown on the hotel receipt
- · Deduct any days the hotel room was not used for approved business purpose travel
- Any meals charged on the hotel folio need to be deducted from the hotel amount being reimbursed
- Any room upgrade fees (ex. Hotel suite) are not reimbursable & cannot be included on the expense report

MEALS/ EXPENSES & ADJUSTMENTS

- Attach the conference agenda
- Utilize the Travel Allowance feature in Concur to apply per diem
- Any meals provided by the conference need to be deducted from the per diem
- Per diem for personal travel days needs to be excluded



INTERNATIONAL RECEIPTS

- · Currency converter feature should be utilized to convert receipts that are in a foreign currency
- · Lodging and food per diem rates apply: U.S. Department of State | Home Page
- · Credit card statement should be included showing amount paid in



- Receipt or expense line item should include the departure and return location of the trip Proof of payment needs to be present - credit card statement or copy of the credit card that
- matches the last 4 digits shown on the taxi/shuttle/Uber/Lyft receipt
- · Taxi/Uber/Lyft used for transportation to/from restaurants or excursions are not reimbursable & cannot be included on the expense report
- Uber/Lyft Premium Services are not reimbursable
- Uber//Lyft Priority Pickup Upgrade is not reimbursable

RENTAL CAR



- Receipt should show that Economy Class was purchased
- Proof of payment needs to be present credit card statement or copy of
- the credit card that matches the last 4 digits shown on the rental car receipt
- Deduct any days the rental car was not used for approved business purpose travel

PARKING



- Economy lot must be utilized
- Proof of payment needs to be present credit card statement or copy of the credit card that matches the last 4 digits shown on the parking receipt
- · Parking lot services such as White Glove Service are not reimbursable & cannot be included in the total amount being reimbursed

MILEAGE



- For day travel, the business purpose of the travel needs to be included in the "purpose of the trip" field. Ex. Event name, project name, etc.
- Deduct normal work commute if travel occurred on a normal workday (make a comment if there is a special circumstance like a scheduled remote day/holiday)
- · The mileage calculator must be used and applied to all personal car mileage
- · A physical street address must be included on all mileage entries
- If utilizing paper forms, the Google Map copy needs to be attached showing the route being reimbursed

EXTRA TIPS

- Include receipts for expenses over \$35 Timely submission:
- Day Travel must be submitted 45 days after monthly travel has been completed Overnight Travel must be submitted 10 days after travel has been completed





When Students are Traveling with Employees

- Employee should process their own travel request in Concur with all of their own estimated expenses
- Student (s) should process their own travel request via paper travel form with all of their own estimated expenses
- After the travel, if the employee paid out of pocket for any of the student's expenses, they can
 include those items on their expense report in Concur
 - list the student's encumbrance number
 - allocate those expenses to student travel account code 7217



Payment Methods

- Rowan's Travel Agent, <u>Direct Travel</u> for airfare & lodging with an approved encumbrance #
- University <u>Pcard</u> with approved encumbrance # email as backup
- Personal Credit Card



Chat with Travel Sessions

• These sessions provide Rowan faculty and staff the opportunity to pop in at their convenience to chat with the travel team in an open WebEx session. An AP travel team member is available once a week from 9:30am-1pm and 2pm-3:30pm to discuss any travel questions, comments, or concerns.

Visit AP's <u>News and Updates</u> webpage to see upcoming dates listed in the Daily Mailers

Contact Information

- For Accounts Payable Related Questions: Accounts Payable Webpage
- For more information specifically related to **Student Travel**: <u>Student Travel</u>
- Email <u>AskTravel@rowan.edu</u>
- To learn more information about applying for and/or utilizing a **Pcard**: visit Procurement's webpage Purchasing Cards
- Export Control
- Study Abroad



Questions?