Rowan University
ACCOUNTS PAYABLE

Student Travel Expense

** For AP Use Only **
Banner Invoice #

Section 1: This form is used to process approved reimbursements for overnight travel once the official University business has occurred (Domestic and International).

Date: _____ Encumbrance No.: _____

Traveler's Name: _____ Banner ID #: _____

Mailing Address: _____ Apt/Unit: _____ City: _____

State: _____ Zip: _____ Department Name: _____

Travel Destination: _____ Dates of Travel: _____
(City & State)

Conference Name: _____ Purpose of Trip: _____

Section 2: Description of Expenses (For more information please visit: Travel Policy)

Date(s)	Items	Description of Expense (In Detail) (Examples: Hotel name, Conference, Registration, Airline name)	Miles Only	2025 IRS Mileage Rate	Line Totals(s)
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
				.70	
			Grand Total:		0.00

Please note: Meals included as a part of the registration fee are deducted from the per diem payment.
Federal Per Diem Rates: US per diem rates, Foreign per diem Rates

(Please attach original itemized receipts)

Section 3: Account Information (Account # 7215 for mileage expenses. Account # 7216 for all other travel expenses and employee travel. Account # 7217 for Student travel)

Index #	Fund #	Organization #	Account #	Program #	Approved Amount $

Section 4: Signature & Consent

I hereby certify that the travel and expenses indicated hereon, where incurred to accomplish official business pursuant to the travel authority granted to me by the Encumbrance number noted above:

Traveler Signature: _____ Date: _____

Section 5: Appropriate Approvals (Print and Sign)

Department Head / Dean: _____ Date: _____

Grants: _____ Date: _____

Accounts Payable: _____ Date: _____