

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	2026 IRS Mileage Rate	Line Totals(s)
				.76	
				.76	
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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](#)

Grand Total: _____
 (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: _____