
AL AKHAWAYN UNIVERSITY

Business Trip Order

Date _____
Name of Employee _____
School or Department: _____
Destination _____
Source of Funding for the Travel (Grant, Budget, etc.) _____ Cost Center ____
Currency Needs: (US\$, Euro, etc.) _____ **(requires 3 day minimum advance notice to accounting - you must present your passport to accounting)**

Departure date _____ Time _____
Return date _____ Time _____

Purpose of the trip: _____

Personal vehicle used: Yes No

Actual Expenses

Personal vehicle (_____ Kms x 2.5 rate per Kms) _____
Hotel _____ **(please attach invoice)**
Registration Fees _____
Train _____ Bus _____
Taxi _____ Per Diem _____
Other _____

***** Receipts must be submitted for reimbursement of expenses *****

For Business Office use only

Calculation of Allowance :

Per Diem:

Overnight:

Other expenses:

AMOUNT OF REIMBURSEMENT APPROVED _____

SIGNATURES

Employee _____ Date _____

Head of Department _____ Date _____

V.P.A.A _____ Date _____

President Approval, if required _____ Date _____

V.P.F.A _____ Date _____