## UNIVERSITY OF MICHIGAN FACILITIES MAINTENANCE

## TRAVEL REQUEST

This form is required for all persons who wish to travel for work-related training sessions, meetings or conferences – regardless of whether or not a travel advance is requested. The original of this form must be signed by the appropriate foreman or supervisor and approved by the Associate Director in advance of any reservations for the proposed date of travel.

## **TRAVEL DETAILS**

Traveler:	FM Dept/Shop:	
Conference/ Program Name	:	
Destination:	Nature of participation:	
Was this training and travel	budgeted for specifically in this fiscal year? YES	S NO
Could training be held local	ly? YES NO	
Is this one time training for	employee? YES NO if no, see below.	
Is this part of a series, i.e. 1	of 3 modules? If so, when are the rest of the mod	dules anticipated?
Please indicate the anticipate	ed cost for the remaining modules:	
Will employee be able to tra	ain coworkers? YESNO	
Departure date://	_ Return date://	
Supv's. Estimate of Travel Conf/Reg Fee \$ Transportation \$ Lodging \$ Other \$ TOTAL \$	Shop Short Code: Outside Funds: Work Request:	
REQUIRED SIGNATURES		
	gnature/Date:	
Supervisor/Foreman	Travel Coordinator Ass	sociate Director
 Date	Date	Date

Distribution:

Original: with Travel Advance Form or Event number

Copy 1: in travel file (POCC)

Copy 2: Department
Copy 3: Employee