## EST. 1979

## SBA TRAVEL REQUEST

A completed form must be submitted to SBAadmin@gmu.edu at least 30 days prior to the date of departure. Please retain all receipts, confirmation messages, reservation details, and proofs of payment, and submit a Reimbursement Request within one week of your return.

	Event Information	<u>on</u>
Student Organization:		
<b>Event Title:</b>	Location:	
<b>Event Start Date:</b>	Event End Date:	
Business Purpose: (Please provide or attendees,	letails about your travel; i.e. on nature of competition, profes	description of event, type of audience sional interests, etc.)
	Travel Informati	ion_
<b>Departure Date:</b>	Return Date:	
Method of Travel:	# Participants:	# Teams:
Traveler Info		
Name:	Name:	
G#: Date of Birth:	G#: Date of Birth:	
Driver License State:	Driver License State:	
	T. (	
Ground Transportation:	Estimated Ground Transportation Total:	
Lodging:	Estimated Lodging Total:	
*SBA-Approved Amount:	Attach snippet of event/travel budget.	
*Anticipated total amount to reimburse all students:		Attach any pre-trip payments, confirmations, receipts, or reservations.
OTHER:		