

Employee Travel Request - Form 705

Conference or Training Itinerary/Schedule must be attached in TripTracker, along with this form.

[Link to Administrative Letter 25](#)

Contact Name: _____
District Employee(s) _____
Traveling: _____
Account to be billed: _____
Reason for trip: _____
Destination: _____
Departure date/time: _____ Return date/time: _____

Transportation Type:

- District Vehicle
 SUV
 Private Vehicle Year/Make/Model/VIN: _____
 Rental Car

Flight Information & Cost:

All flights must be booked through Christopherson Travel: 801-538-3350, statetravel@utah.gov. If not booked through Christopherson, reference Administrative Letter 25, and attach proper documentation.

Airline: _____ Estimated Cost: _____

Hotel Information & Cost:

[In State Hotel List - Click HERE](#)

Out of State Hotels (attach proper documentation)

Hotel Name: _____ Est. Cost per night: _____

Per Diem:

	Breakfast	Lunch	Dinner
Number of Meals provided by hotel and/or conference:	_____	_____	_____
Number of Meals to be reimbursed by the district:	_____	_____	_____
Private Vehicle Mileage Per Diem:	_____		

Reference Administrative Letter 25 for Food & Mileage Per Diem. In State: Breakfast \$10, Lunch \$14, Dinner \$19

Estimated Total Trip Expenses:

Flight: _____
Hotel: _____
Conference Registration: _____
Food Per Diem: _____
Mileage Per Diem: _____
Other (parking, shuttle, taxi, etc.) _____

Total Estimated Cost: _____

Administrator

Approval: _____