INTERNAL TRAVEL REQUEST FORM

(Please review notes below right corner)

Traveler Infor	mation					
Last Name:			Position:			
First Name:			VIP ID#:			
Email:			(Faculty & Staff Only)			
Phone:						
Title of Confer	ence/Training:					
Purpose of Tri	p:					
At this confere	ence, I am -					
presenting presenting an invited address (workhop)	senior author co-a attending workshops and other	attending for professional development	Begin Date		l Date:	
* DAILY LODGING	um daily rates are b 335.00; Out-of-stat i RATE - the maxim	um rate is \$350.00 pe	r national rates ba er night	ased on month & location – All Personnel -	Approval	
Days: Lodging	Rate:	Total:		uest must be approved PRIO ordless of funding source.	OR to first date of travel,	
Nights: Mileage	Rate:	Total:	SAVI the	All Personnel - Form Submission Save the completed form to your desktop (click FILE, SAVE AS and give the document a NEW name). Attach the form to an email and send to Miriam Callaham -		
Total Miles:	Rate:	Total:	Log	callahmi@mailbox.sc.edu. Faculty/Staff - Obtaining Your VIP ID Number Log into "https://my.sc.edu". After logging in, click the		
	Airfare:		click "For	"Faculty/Staff" tab. Under the "PERSONAL" heading, click "View my IDs and manage my passwords". Click "Forgot IDs". Answer the security questions, click "Submit" and the next screen will show your 8-digit VIP		
Registration:	Т	axi/Bus/Shuttle:	ID n	ID number. Provision of this number is MANDATORY, per the USC Travel Office.		
Parking:	Parking: Rental Car:			Grad Students - Travel Awards This form must be completed if you are NOT applying for a Graduate Student Travel Award or if your request for a Graduate Student Travel Award was not approved.		
Funding Co.	(-)	Total Request:		Questions - Contact Miria	am @ 803-777-8597	
Funding Sou	rce(s)					
Operating Unit	Dept	Fund Code	Class Field	PC Business Unit	Project ID	
Operating Unit	Dept	Fund Code	Class Field	PC Business Unit	Project ID	

Date of Last Dept. Award:

Date