

LAMAR STATE COLLEGE PORT ARTHUR  
REQUEST TO TRAVEL AT COLLEGE EXPENSE

Name: \_\_\_\_\_ Emp. P#: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Position: \_\_\_\_\_

Destination: \_\_\_\_\_ Date(s) of Travel: From \_\_\_\_\_ To \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Table 1: Provision for Instructional Program**

Course No.	Section Group	Assignment	Instructor in Charge

**Table 2: Estimated Expenses Worksheet**

Banner Account Number	Object Code	Description	Estimated Expense
717101	4001	Tx-Public Transportation	
717102	4002	Tx-Mileage	
717105	4004	Tx-Incidental Expenses	
717106	4005	Tx-Meals/Lodging	
717111	4006	Non-Tx-Public Transportation	
717112	4007	Non-Tx-Mileage	
717115	4009	Non-Tx-Incidental Expenses	
717116	4010	Non-Tx-Meals/Lodging	
717131	4012	Prospective Employees	
747203	4013	Registration Fees	
		<b>Total</b>	

Requested by: Traveler \_\_\_\_\_ Date \_\_\_\_\_

Recommended by: Department Head \_\_\_\_\_ Date \_\_\_\_\_

Approved by: Dean/Division Administrator \_\_\_\_\_ Date \_\_\_\_\_

Approved by: Vice President \_\_\_\_\_ Date \_\_\_\_\_

Approved by: Business Office \_\_\_\_\_ Date \_\_\_\_\_

Index Number: \_\_\_\_\_

Approved by: Office of the President \_\_\_\_\_ Date \_\_\_\_\_

**Public Transportation:** Airlines, Rental Car, Cab Fare  
**Mileage:** Personal Car Mileage, 65.5 cents per mile  
**Meals/Lodging:** Please see [Meals and Lodging Rates](#) on LSCPA travel website.  
**Incidental Expenses:** Room tax, business phone calls, parking, etc.