Appendix EE Updated 1.10.2022

**BEVILL STATE COMMUNITY COLLEGE**

**PRE-TRAVEL AUTHORIZATION FORM**

**In-State Per Diem**

**In-State Actual (Claim only if Bevill is a dues paying member\*)**

**Out-of-State Actual**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Meeting or Conference: Enter name of meeting or conference.

**(Attach a copy of the agenda and please do not use acronyms.)**

Destination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Purpose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names of other Bevill State personnel attending this conference/meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mode of travel: [ ] Air [ ] State Vehicle [ ] Personal Car [ ] Other

(If you choose to drive a personal car instead of via an airline, please provide the air fare rates for the time frame of the travel.)

Date Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Returning: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Indicate which one of the three types of pre-travel authorizations you are seeking and complete required information for that section. Travel will
be reimbursed in the most economical method for the College.**

[ ] **Out of-State Actual**

Per Diem $\_\_\_\_\_\_\_\_\_\_\_

Hotel $\_\_\_\_\_\_\_\_\_\_\_

Fare or Mileage $\_\_\_\_\_\_\_\_\_\_\_

58.5 cents per mile

Registration $\_\_\_\_\_\_\_\_\_\_\_

Other $\_\_\_\_\_\_\_\_\_\_\_

Total $\_\_\_\_\_\_\_\_\_\_\_

[ ] **In-State Actual**

\*Insert Name of Member Organization

Click here to enter text.

Hotel $\_\_\_\_\_\_\_\_\_\_\_

Fare or Mileage $\_\_\_\_\_\_\_\_\_\_\_

58.5 cents per mile

Registration $\_\_\_\_\_\_\_\_\_\_\_

Other $\_\_\_\_\_\_\_\_\_\_\_

Total $\_\_\_\_\_\_\_\_\_\_\_

[ ] **In-State Per Diem**

Per Diem $\_\_\_\_\_\_\_\_\_\_\_

Fare or Mileage $\_\_\_\_\_\_\_\_\_\_\_

 58.5 cents per mile

Registration $\_\_\_\_\_\_\_\_\_\_\_

Other $\_\_\_\_\_\_\_\_\_\_\_

Total $\_\_\_\_\_\_\_\_\_\_\_

Per Diem

$12.75 trips 6-12 hours

$34.00 trips exceeding 12 hours

$85.00 per day for 2-day trip/1 night, etc.

$100.00 per day for 3-day trip/2 or more nights

[ ]  I waive the right to In-State Actual and will be claiming In-State Per Diem for this travel.

Job and/or class responsibilities while away will be assumed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Requester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APPROVALS:

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

(1.) Immediate Supervisor (2.) Appropriate College-wide Dean

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

(3.) President (For all Out-of-State or In-State Actual)

If not approved, state reason and return to requester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_