

# ANGELO STATE UNIVERSITY

## Student/Group Travel Form

Please complete this form **at least 10 working days prior to the trip** and provide a copy of this form to the University Police.

*Please print or type*

Sponsoring Organization \_\_\_\_\_

Trip Coordinator \_\_\_\_\_ Phone (O) \_\_\_\_\_ (H) \_\_\_\_\_

Destinations \_\_\_\_\_  
*(If multiple destinations, please attach a trip itinerary)*

Purpose of Trip \_\_\_\_\_

Date(s): From \_\_\_\_\_ To: \_\_\_\_\_

**Transportation** \_\_\_\_\_ Airline/Bus/Train (carrier) \_\_\_\_\_  
\_\_\_\_\_ By university contracted rented vehicle  
\_\_\_\_\_ By personal Vehicle (license plate number) \_\_\_\_\_, state \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_

Date and time of departure \_\_\_\_\_

Date and estimated time of arrival at destination \_\_\_\_\_

Name of Driver(s) \_\_\_\_\_ Name of Alternate Driver(s) \_\_\_\_\_

DL#(s) \_\_\_\_\_ DL#(s) \_\_\_\_\_

### Lodging

Name of hotel/motel \_\_\_\_\_  
*(If multiple destinations, please attach additional accommodations)*

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Address and phone number, if other than above, where you may be reached: \_\_\_\_\_

Provide the name of the Advisor accompanying this trip. (If more than one person, please attach additional names.)

Name \_\_\_\_\_ ASU Phone Number \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Are University resources being used to fund any portion of this trip? Yes \_\_\_\_\_ No \_\_\_\_\_

I certify that the organization I represent has agreed to sponsor this trip and will take responsibility for conducting it according to the policies governing such matters. The sponsoring organization takes sole responsibility for all financial obligations and for the actions, activities, and products associated with this trip. In addition, I certify that I will/have inform(ed) others on the trip of the University requirements governing student travel.

\_\_\_\_\_  
Sponsoring Organization President      Address      Phone      Date

\_\_\_\_\_  
Sponsoring Organization Advisor      Address      Phone      Date

\_\_\_\_\_  
Date Received      Approval