

# Travel Reservation Request

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**Current Date:**

Employees Only

**Name:**

**Funding Source C-FOAP:**

**Business Purpose and how it benefits the University. Please be specific. Use additional pages if necessary:**

**Travel Dates (to and from):**

**Choose Method of Travel**

**Flights**

A Profile must be filled out on the i-Travel Online Booking Tool on the OBFS.uillinois.edu website before booking. University Credit Card preferred. Economy /Coach flight required. Baggage Fees will be reimbursed. Submit receipts along with the University Travel Reimbursement Form within 90 days of travel.

**1. Departing Airport:**

(if different from Preferred  
City entered in travel profile)

**2. Destination Airport:**

**3. Flight Times:**

(to and from destination)

**4. Alternate Flight Times:**

(in case first one is  
unavailable)

***\*Preferred flight times and seats are not guaranteed***

**Train**

**Leave Date:**

**Time of Departure:**

**Departure Station:**

**Arrival Station:**

**Return Date:**

**Time of Return:**

**Conference**

**Sponsored by:** \_\_\_\_\_ **Conference Name:** \_\_\_\_\_  
**Location:** \_\_\_\_\_ **Conference Fee:** \_\_\_\_\_  
**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Conference Fees will be pre-paid. Please provide website:** \_\_\_\_\_

**Hotel**

**Hotel Name:** \_\_\_\_\_  
**Hotel Address:** \_\_\_\_\_

**Arrival Date at Hotel:** \_\_\_\_\_ **Departure Date from Hotel:** \_\_\_\_\_

**Is this a conference hotel? Yes or No** \_\_\_\_\_ **If yes, attach conference brochure** \_\_\_\_\_

**Please have your reservation made as soon as possible as the rooms fill up quickly.**

Conference hotel rates are usually higher than the University limit, so please provide the conference brochure with the name of the hotel listed. Hotel costs will be pre-paid, but the traveller **must obtain a receipt upon checkout** and submit it to the person who paid for the reservation *immediately* upon return from the conference.

**Per Diem, Mileage, Taxi's & Public Transportation, Car Rentals, Baggage Fees, etc.**

Upon returning from your trip, please submit the University Travel Reimbursement Form within 90 days of your travel. You are required to submit all reimbursement requests within 90 days of the charge and/or travel or the reimbursement may be considered taxable income.

**Ground Transportation**

Shuttles to and from airport to hotel: (Yes or No)

*Will be pre-paid with reservation.*

**Car Rental:** UIS prefers travellers not rent a car unless it is absolutely necessary. UIS contracts with **National and Enterprise**. *Rental cars can be reserved but not pre-paid.* Submit receipts along with the University Travel Reimbursement Form to be reimbursed. **Please choose the most cost effective option available.**

**Motor Pool:** For in-state car travel, using the motor pool is preferred to car rental or self-driving. See the Dean's office for instructions or go to the **Motor Pool** website.

**Signatures:**

**Requestor:** \_\_\_\_\_

**Chair:** \_\_\_\_\_

**Dean:** \_\_\_\_\_

**Date:** \_\_\_\_\_