

Student Travel Authorization Form

Date:	(mm/dd/yyyy)			
Requestor's WKU ID:				
Full Name:				
Major/Concentration:				
Name of Conference:				
Departure Date:	(mm/d	ld/yyyy)		
Return Date:	eturn Date: (mm/dd/yyyy)			
City:	State:		_	
Course in which paper wa				
	Title and 50 word	abstract	of paper	
See Mary for Per Diem a	nd Mileage Rates	Rate	Number of Days	SUBTOTAL
	Airfare		Days	
	Airiare			_
	Car Rental			
Lodging (insert rate	e and number of days)			
	Mileage			
Per Diem (insert rate	e and number of days)			
	Registration Fee			
	Miscellaneous			

TOTAL