

Kansas State University

Request for Travel Approval

Email request to IRAWG@ksu.edu

Traveler Name: _____

Title: _____

Department: _____

WID Number: _____

Name and WID Number of Other K-State Travelers and/or Students:

Departure Date: _____ City: _____

Return Date: _____ City: _____

In-Country Contact Information for K-State Traveler: _____

In-Country Contact Information for Location Where Staying/Working (include address and telephone number):

Detailed itinerary while in country, including all locations to be visited and transportation details including types of transportation to and from these locations:

Justification/Purpose for Trip:

Traveler Signature: _____ Date: _____

Department Authorized Signature: _____ Date: _____