

**PER DIEM REQUEST  
FOR TRAVEL**

Name of person submitting request:

Department:

Date submitted:

Per Diem Recipient: \_\_\_\_\_

Banner ID: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

**Be sure MyWeb has your current address!**

**TOTAL** amount of per diem requested: \$ \_\_\_\_\_

*(to find out what acceptable per diem rates are for the city you are visiting, please go to: Gsa.gov and be sure to print the paper that shows the rates.)*

Budget to be charged (FOAP): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Fund Organization Account

Please allow at least two weeks for these to be processed. They will be sent to your home address unless you have set up direct deposit for accounts payable. To do this go to myWeb, secure area, personal info., add/chg. bank account info.

**Explanation of Expenses:**

To (city, state):

For: (conference, etc):

Per Diem rate per day:

Dates Traveling:

Total # of partial days:

Total # of full days:

Per Diems do not require submission of receipts. Per diems are to be used for meals, local transportation expense and incidentals (tips). Please refer to the web link above.

Approval of Treasurer (or other Officer): \_\_\_\_\_

Print Name: \_\_\_\_\_ /Title \_\_\_\_\_ Signature \_\_\_\_\_