

# Jordan School District

## National Travel Request Form

Personal Information	
Traveler name as shown on driver's license	
School Location	
Office Phone	
Frequent flyer program name(s) and number(s)	
Guest(s) Traveling with you (Name as shown on driver's license)	
Travel Information	
Conference Title	
Member of the conference organization	Yes No
If yes, list membership #	
Conference Location	
Website for Conference	
Conference Dates	
Departure Date	
Return Date	
Mode of Travel	Flying Driving
Preferred departure time (e.g., morning, mid-day, evening)	
Preferred return time (e.g., morning, mid-day, evening)	
Shuttle Needed	Yes No
Additional Requests or information	
Lodging Information	
Hotel Preference	
Room preference (e.g., king, double, single)	
Travel Acknowledgement	
Typing your name will serve as your electronic signature. Required	Employees anticipating retiring or leaving the District should not participate in optional overnight travel 6 months prior to the retirement or termination. If they do travel, they may be asked to reimburse the District their travel costs.
Employee Signature	