

Agricultural Development in the American Pacific (ADAP) Project Travel Request Form

Name of Traveler:	Date:
Title:	Name of Project:
Are you a: (Check one that apply ☐ RCUH Employee ☐ Non-	r) Employee ☐ Scholarship Student ☐ Consultant
☐ UH Employee Bargainii	ng Unit (BU) of UH Employee:
Institution:	Citizen of: Social Security #:
Phone:	Fax: E-mail:
Justification/Purpose of Travel (Please make sure it is in line with your project's Plan of Work):	
Please attach airline itinerary (or flight options if Home Office assistance is needed) Please answer the following:	
1. Airline Ticket Needed: Yes	No 4. Per Diem In Advance: Yes No
2. Pre-Paid Ticket Advance(PTA	Needed: Yes No 5. Lodging Needed: Yes No
3. Travel Per Diem Needed: Y	es No 6. Car Rental:
Credit Card Information (for hotel and/or car rental reservations): Name on Card: Billing Address:	
Card Type/Number/Expiration Da	te:
For Office Use:	
Project Number:	Budget Category:(Airfare/Per Diem/Ground Transportation)
	(Airrare/Per Diem/Ground Transportation) Date: 9/11/98