

TRAVEL PLANS FOR EXPEDITION 356T

DUE DATE: 20 APRIL 2015

Please return form to department supervisor by this date.

Name of traveler _____ Cell Phone _____
(as it appears on government-issued I.D.)

Account No. _____ SubCode _____

Cost Reference _____ AMS Requisition _____

ITINERARY REQUESTS:

List the actual dates for all reservations even if it is standard to/from the ship.

Standard departure date: 03 June; Arrive Colombo, Sri Lanka : 05 June (0045 arrival from College Station).

Depart

From _____ Date _____

To _____ Date _____

To **Colombo** _____ Date _____

Does travel include non-IODP travel?

No Yes

Personal travel dates:

Departure Ship from Fremantle to Perth: 31 July; Fly home - 01 August

Return

From **Perth** _____ Date _____

To _____ Date _____

To _____ Date _____

These dates are not associated with tracking vacation or other leave time. They are for hotel/meal reimbursement purposes only.

Concur Notification Completed (Box must be checked before request form will be processed)

HOTEL REQUESTS:

COLOMBO: Cinnamon Grand Colombo, 77 Galle Road, Colombo 03, Sri Lanka.

www.cinnamonhotels.com/CinnamonGrandColombo.htm. The group rate per room is \$130 plus, 26.88% tax for a total of \$165.00 nightly and will be paid upon check-in by guest.

Check In _____ **Check Out** _____

Room Preference: Single **Double**/ Share with: _____

PERTH:

Check In _____ **Check Out** _____

Room Preference: Single **Double**/ Share with: _____

TRAVEL ADVANCE:

Travel advance requested for the above trip: **Yes** **No** Amount calculated by Travel Dept.

Date advance due to traveler: _____ Total advance \$ _____

Travel Advance funds are subject to the terms of the TAMRF-IODP Travel Policy, <http://iodp.tamu.edu/travel/travel.html>. Traveler agrees to comply with the terms of the TAMRF-IODP Travel Policy and to submit the travel expense voucher for this trip within ten (10) days after return. Advance will not be made more than thirty (30) days prior to the date of departure.

SIGNATURES:

I am an employee of TAMUS. Yes No

Is this payment made to or on behalf of a U.S. Citizen or Legal Permanent Resident? Yes No

Traveler's Signature _____ Date _____

(Signature confirms all requested arrangements above)

Approved (Department Head/Delegate) _____ Date _____

(Signature approves all requested arrangements above)

For IODP TRAVEL OFFICE:

Screen 104 Voucher # _____ GL# _____ Screen 111 Voucher # _____