

SJU Travel Office

Travel Request Form Fax to:

610-660-3358

Email Request Form to:

travel@sju.edu

Personal Information	
Traveler name	
E-mail	
Department	
Phone	
Fax	
Fund, Organization and Account Number to be charged	
Name of person who approved travel	
Name of person requesting this itinerary	
Travel Information	
Destination	
Departure date	
Preferred departure time (e.g., morning, mid-day, evening)	
Return date	
Preferred return time (e.g., morning, mid-day, evening)	
Is a car rental needed? If yes, what size?	
Do you need additional tickets for travel companions?	
If yes, please list their names and provide a personal credit card for their ticket charges	
Lodging Information	
Name of Requested Hotel	
If this is a conference, please list the complete name of the conference and any discount codes you may have been given	