



Student Travel Authorization Form

Date: _____ (mm/dd/yyyy) Requestor's WKU ID: _____

Full Name: _____

Major/Concentration: _____

Name of Conference: _____

Departure Date: (mm/dd/yyyy) _____

Return Date: (mm/dd/yyyy) _____

City: _____ State: _____

Course in which paper was developed: _____

Title and 50-word abstract of paper

See Mary for Per Diem and Mileage Rates	Rate	Number of Days	SUBTOTAL
Airfare			
Car Rental			
Lodging (insert rate and number of days)			
Mileage			
Per Diem (insert rate and number of days)			
Registration Fee			
Miscellaneous			
TOTAL			

Please email completed form to english.travel@wku.edu

Department Head Signature _____ Amount Approved \$ _____