



Student Activity Travel Advance

(Note: If activity is out of state, "Request for Out of State Travel" form must be filed in advance)

Issued to: _____, A# _____
(please include A#)

Destination(s): _____

Purpose of Trip: _____

Departure Date: (advance will be paid 7-10 days prior) _____

Amount of Advance Requested \$ _____

Form of Payment Requested Check Direct Deposit

Account to be Charged _____

Requested by _____ (printed) _____ (signed)

Authorized by _____ (printed) _____ (signed)

To Be Completed Within 30 Days of Return:

Date of Departure _____ Time _____ AM _____ PM
Date of Return _____ Time _____ AM _____ PM

Advance Received (from above) \$ _____

Less: Expenses (attach receipts) (_____)

Balance due to SDSM&T (if positive)
 Payee (if negative) \$ _____

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

PAYEE SIGNATURE: _____
AUTHORIZING SIGNATURE: _____