REQUEST FOR INTERNATIONAL TRAVEL

Traveler must complete this form and receive all approvals BEFORE incurring expenses related to the travel request.

Name: Carla Hagan
Title/Rank: Asst. Prof
EKU ID: 900523268
Department: Agriculture
Campus Mailing Address: 2 A.B. Carter Bldg

Destination: Costa Rica

Travel Dates: 12/14/24-12/21/24

Purpose of Trip *(do not abbreviate)*:
Traveling with 2 EKU students while they are conducting Research in Costa Rica. Will be conducting NSF sponsored research in the field with two EKU students, MARY ANDREOLA and EVELENA CECIL, and also leading Earthwatch program participants in the field. All room and board includes meals, and Dr. Valerie Peterswill be paying for research expenses from Earthwatch grant and NSF Grant.

ESTIMATED Expenses	
Travel: 751.93 + 160.00 (bags)	$ 911.93
Lodging: 167.97	$ 167.97
Meals: 132.00	$ 132.00
Registration: 4335.00	$ 4335.00
Other: car rental 1000.00	$ 1000
TOTAL: 6546.00	$ 6546.00
LIMIT (if any): 4500.00	$ 4500.00

*Personal automobile not to exceed coach airfare; provide airfare quote for travel dates. If requesting a rental car, please attach justification.

Group Travel (For group travel, all applicable international travel requests should be submitted together.)

Does any portion of the trip include students and/or other faculty/staff? Select one.

IF YES, who is coordinating the group travel? Carla Hagan via Valerie Peters

NOTE: For group travel, the travel request must include a memo from the coordinator of the group travel that describes (1) the justification for group travel, (2) the number of EKU faculty/staff requesting to participate, (3) a list of all individuals planning to participate, and (4) the estimated total cost to EKU for the group travel.

Traveler:			Date: 12/11/24
Supervisor:			Date:
Financial Manager:			Date:
	Org. Code: 454303	Acct. Code: 750030	Amount: $ 4500.00
Dean/Director:			Date:
Education Abroad Director: *(Travel that includes students should be approved by the Education Abroad Director before going to the Provost.)*			Date:
Executive VP for Academic Affairs & Provost:			Date:

Approved requests are forwarded to Accounting and copied to the traveler, the dean/director, and the Executive Director of Public Safety & Risk Management.

Additional Financial Manager(s) *(if applicable)*:	
Signature:	Date:

	Org. Code: 45403	Acct. Code: 750030	Amount: $ 4500.00	
Signature: ______________________________				Date: ______________
	Org. Code: __________	Acct. Code: __________	Amount: $______________	