



Overnight Travel Request & Authorization (OTR) RR#

INSTRUCTIONS: Complete this request for any overnight travel (in-state, out-of-state or international). Attach the activity/conference information (brochure, registration form, and agenda etc.).

ALL overnight travel must be approved by the VP of Admin Services (or Delegate) **PRIOR** to making any travel arrangements.

ALL international travel requires CCCS President (or delegate) approval **PRIOR** to making travel arrangements.

➤ **Forward original signed/approved OTR to Michelle King, Business Services, michelle.king@rrccedu to receive an RR#.**

Type of Travel	<input type="checkbox"/> In-State <input type="checkbox"/> Out-of-State <input type="checkbox"/> International <i>(CCCS President/ Delegate Approval Required)</i>																		
Travel Required for	<input type="checkbox"/> Position Duties <input type="checkbox"/> Professional Development <input type="checkbox"/> Student Travel /Study Abroad <input type="checkbox"/> Course Field Trip <input type="checkbox"/> Award for Employee of Year/Endowed Teaching Chair <input type="checkbox"/> Other _____																		
Traveler Name		Date of Request																	
Traveler S#		Destination(s)																	
Dept/Division		Departure Date																	
Ext and Email		Return Date																	
Type of Activity or Conference Title																			
Purpose and RRCC Benefit																			
Notes																			
Budget	<p>ORG Code: _____ ORG Code for expenses over the budgeted amount: _____</p> <p>Do you require a travel advance (cannot exceed \$2,500)? <input type="checkbox"/> No <input type="checkbox"/> Yes Amount \$ _____</p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse; width: 60%;"> <tr><td style="text-align: center;">Registration Fee</td><td></td></tr> <tr><td style="text-align: center;">Airfare</td><td></td></tr> <tr><td style="text-align: center;">Rental Vehicle</td><td></td></tr> <tr><td style="text-align: center;">Lodging</td><td></td></tr> <tr><td style="text-align: center;">Mileage Expense</td><td></td></tr> <tr><td style="text-align: center;">Meal & Incidentals</td><td></td></tr> <tr><td style="text-align: center;">Miscellaneous</td><td></td></tr> <tr><td style="text-align: center;">TOTAL</td><td></td></tr> </table>			Registration Fee		Airfare		Rental Vehicle		Lodging		Mileage Expense		Meal & Incidentals		Miscellaneous		TOTAL	
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College Review/Approvals

Approved Amount: \$ _____ Declined

Direct Supervisor: _____ Date: _____

Vice President: _____ Date: _____

Grant Funded? No Yes, Grant Program Investigator (PI): _____

Travel funded by a grant MUST be approved by the Grant Program Investigator (PI) prior to Presidential approval.

Grant Accountant: _____ Date: _____

VP of Admin Services/Delegate: _____ Date: _____

CCCS President/Delegate: _____ Date: _____

Required for International travel only