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% \$%% 'Z! Ghi XYbhBcb!9a d`cmYY Travel Agreement

Traveler Information

Student's Name:	
Student's E-Mail	
Department Sponsoring Travel:	
Total Dollar Amount to be reimbursed	l:

	, representative f	or UNC-CH's	department of
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hereby certify that

whose travel is related to official state business as indicated below.

To enhance the visibility of a department or program to its peers and/or future or current customers
To exchange information and knowledge relevant to improving the services of this department or program.
To enhance skills relevant to improving volunteer services that are used to support a department or program.
To provide for other activities in support of this department or program (describe below).

Signatures			
Student:			
	Signature	Date	
Dean/Department Head/Director :			
	Signature	Date	

* Please include this signed agreement when you send reimbursement documentation via ImageNow to Web Travel for all student/nonemployee reimbursements.