

EASTERN ILLINOIS UNIVERSITY
Travel Exception Approval Form

Name of Traveler _____ Date of Travel _____

Org/Index Number: _____ Org/Index Name _____

Destination _____

EXCEPTION:

Lodging Amount Allowed _____ Lodging Amount Requested _____

Traveler's justification for exception to lodging travel regulations: **Choose one and provide additional info.**

No Alternative (least costly room available in area)

Required Location (selection necessary to conduct University business)

Least Total Cost (ground transportation makes alternative lodging uneconomical)

Chosen in error

If this exception is denied by the Travel Control Board, I agree to reimburse the University for the amount denied.

Traveler's Signature

Date

Shaded area for Accounts Payable use only

A \$ _____ Exception is requested to the State of Illinois Travel Regulations, Section 3000.400.

Accounts Payable

Date

Approved to pay travel reimbursement as submitted and to file with the Higher Education Travel Control Board as a travel exception:

Approval Signature _____

Director, Business Services / Treasurer

Date

xc: Traveler