

# Resident Travel Request Form

January 2022

**Resident Name:** \_\_\_\_\_

**Personnel Number:** \_\_\_\_\_

**Program:** \_\_\_\_\_

**Name of Conference:** \_\_\_\_\_

**Location of Conference:** \_\_\_\_\_

**Dates of Travel:** \_\_\_\_\_

**Attending** \_\_\_\_\_ **or** **Presenting** \_\_\_\_\_

**If presenting, has it been entered into NI:** \_\_\_\_\_

**Account Number to Charge:** \_\_\_\_\_

**Maximum Reimbursement:** \_\_\_\_\_

(Put none if no UT funds are used and put unlimited if there is no cap)

\_\_\_\_\_  
**Coordinator or Program Director Signature**

**You must include copies of the conference agenda and hotel block rates with this form.**

**NOTE:** To ensure availability to funds, please submit travel request at least 30 days prior to travel.