Dr. Coretta Boykin, President
Reid State Community College
P.O. Box 588
Evergreen, Alabama 36401

Date: _____

Dear Dr. Boykin:

Request is respectfully made for authorization of travel by _____
Employee

to _____ , _____ for the purpose of _____
City State

_____

_____

Mode of Transportation _____

Lodging (specify hotel if known) _____

Date of Departure _____

Date of Return to Home Base _____

ESTIMATED COST

Transportation _____

Conference Fee _____

Registration Fee _____

Room _____

Meals _____

Signature _____

_____
Type or Print Name

Approved: _____
Supervisor/Department Chair

Approved: _____
Dean of Instruction/Students

Approved: _____
Business Manager

Approved: _____
President

In City Transportation

Taxi _____
Car Rental _____
Total$ _____

Expenses will be paid from:
State Funds ☐
Federal Funds ☐

Charge to: _____