DEADLINE to submit form: *At least 72 Hours Prior to Travel Event*
Allow for more time for group travel reservation requests.

Program/Gift Account #:

Requester's Name:	Date(s) of Event:	Today's Date:
Name of Event/Program:	Email:	Phone:

Hotel Name:	Conference Hotel
Address/City/State/Zip:	

Hotel Phone #:	Hotel Rep:	Group Rate Code:

Please call hotel PRIOR to submitting form to confirm rates & availability. Ask your advisor!

Guest Name(s) *(If more than 10 rooms, please attach an additional form or a full list)*	Check In Date	Check Out Date	# Nights	Room Type	# People
Room #1:					
Room #2:					
Room #3:					
Room #4:					
Room #5:					
Room #6:					
Room #7:					
Room #8:					
Room #9:					
Room #10:					

Special Room Requests *(disability accessible, rollaway bed, etc. ~ include Room #(s) from above):*

Payment Method: ☐ Direct Bill room and tax only to WSU. ALL incidentals **MUST** be paid by guest(s) *(meals, phone calls, internet, etc.)*.
☐ Other: _____
Full-time staff will arrange and pay for their lodging and request reimbursement. If lodging request is for student employees or a speaker who is a WSU employee, a Pcard exception is needed. Please check in with Chloe Campbell on this process.

Reservation Confirmation: Please email confirmation(s) to: _____

Lodging Per Diem Rates:
https://www.gsa.gov/travel/plan-book/per-diem-rates

Estimated $

$

	Estimated $
Cost Subtotal	
Taxes *(Pullman = 7.9%)*	
TOTAL ☐ *Not to exceed*	

Signature of Requester:
Signature Account Authority/Advisor:
Signature of Associate Director *(**IF** purchase is over $2000)*:

Complete this form and submit to the Finance Team at getinvolved.finance@wsu.edu