

Travel Request Form – To submit before Traveling

Employee's Name : _____ Tel Ext: _____

Designation : _____ Department _____

Immediate Superior : _____

Travel Destination : _____

Reason for Travel : _____

Date Leaving : _____

Date Returning: _____

Approved By:

Departmental Manager

General Manager

Managing Director

Please route this form to the Accounts Department after approval.

FOR ACCOUNTS USE	
<input type="checkbox"/> Air Ticket Booked	<input type="checkbox"/> Car Rental
<input type="checkbox"/> VISA Application	<input type="checkbox"/> Others: _____
<input type="checkbox"/> Per Diem of Amount	_____
<input type="checkbox"/> Apartment Rental / Hotel Accommodation	<input type="checkbox"/> Cost Centre