

UNIVERSITY OF CENTRAL FLORIDA

	Name of Department/College/Center/Area Campu
Date: To:	Dr. Michael D. Johnson, Provost
	University of Central Florida
From:	Name of Travel Preparer/Requestor
	Name of Department/College/Center/Area Campus
Re:	Employee travel to
accom	urpose of this memo is to request your approval for employee hotel modations for travel within 50 miles of the traveler's headquarters or home, ever is closer to the destination.
Name	of Traveler
Position	on
Name	of Department/College/Center/Area Campus
	de a brief description of the purpose of the travel and provide justification for accommodations within 50 miles of the traveler's headquarters or home.
Should	d you have any questions or require additional information, please call me at
(Telep	phone Number)
 Signat	ture of Traveler's Supervisor Provost Approval
Jigirat	are or traveler a supervisor