

DEPARTMENT OF HUMAN NUTRITION, FOODS, AND EXERCISE (HNFE) College of Agriculture and Life Sciences (CALS)

Do NOT list any travel expenses paid with a Purchasing Card

PCARD) FORM SUBMISSION (<i>Email to <u>ccurti</u>s8</i> @	<u> Pvt.edu)</u>						
Before travel (Include estimated expendituAfter travel (include receipts and revised for with actual costs)	Land the constitution of the latter of constitution of the constit						
GENERAL INFORMATION							
Name (Last, First):							
Mailing Address - Street, Apt.#, City, State and							
Virginia Tech ID# (Last 4 digits only):	Faculty Mentor:						
TRAVEL INFORMATION							
Departure date:	parture date: Return date:						
Destination:							
PURPOSE OF TRAVEL							
Brief Description							
Conference Name (No abbreviations)							
If you will be presenting, provide title of pres	entation/poster						
LODGING (Hotel name and address)							
Check-in date:	Check-out date:						
Cost per night (exclude tax):							
Conference Hotel: Yes No	Shared Room: Yes No						



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TRANSPORTATION

Personal Vehicl	e Mileage Starting Poin	-		Ending F	Point:				
5 . 10/ 11/				•					
Rental Vehicle	Renta	l:		Gaso	oline:				
Parking/Tolls	Parking	5·			Tolls:				
Air Travel	Air Fare	e:			Fees:				
Other	Bus	s:			Taxi:				
	Trair	า:		•	Lift:				
	Ube	r:		0	ther:				
FOOD/MEALS									
Date	Breakfast	Lunch	Di	nner	Tot	al			
MISCELLANEOUS CHARGES									
Registration fee	<u>.</u>	Prepaid	d: Ye	es 🗌	No [
Other:									
SPECIAL INSTRUCTIONS – REQUIRED (Travel awards, funding, etc.).									
Fund#	Title				Amount	of Perc	entage		