



The Ohio State University Pre-Trip Worksheet (eTravel System)

- This worksheet is an optional tool that may be used to help organize a traveler's pre-trip planning and subsequent entry into the eTravel System.
- The fields below are designed to permit hand-written or keyed entry by the user (see <http://busops.osu.edu/travelforms.php> for electronic version).
- Additional details/instructions may be included in the free form field on page 2.

TRAVELER INFORMATION				
Traveler Name:				Travel Type (as applicable): <input type="checkbox"/> Group <input type="checkbox"/> Blanket
Affiliation:	<input type="checkbox"/> Faculty/Staff	Employee ID:	Vendor ID:	
	<input type="checkbox"/> Student <u>or</u> <input type="checkbox"/> Non-University	Email:	Phone:	

BUSINESS PURPOSE	
Business Purpose of Trip:	
Funding Source (optional):	

TRAVEL LOCATIONS (see page 2 to add additional date/destination detail)			
Departure Date:		Departure Time:	
Return Date:		Return Time:	
Departure City/State/Country:			
Destination City/State/Country:	Destination 1		
	Destination 2		

ESTIMATED COST DETAIL (see page 2 to add additional cost detail)			
Transportation (Air)	\$	Registration	\$
Transportation (Other)	\$	Other	\$
Meals	\$	Other	\$
Lodging	\$	Third Party Payment	\$
			<small>NOTE: Third Party Payment amount should be entered as a negative in order to be deducted from total estimated cost.</small>
Total Estimated Cost			

TRAVEL CHARTFIELD DETAIL (see page 2 to add additional chartfield detail)									
BU GL	Org	Fund	Account	Project	Program	UserDefined	Max Amt	Percent	Est Amt
							\$	%	\$
							\$	%	\$

PRE-TRIP PAYMENTS TO BE PROCESSED IN THE eTRAVEL SYSTEM (see page 2 to add additional pre-trip payment detail)				
<input type="checkbox"/> *Prepaid Airfare (eTravel System Entry Instructions: Be sure to check the box for prepay in the Travel Request)				
\$	Agency Name:		Record Locator:	(optional)
<input type="checkbox"/> Registration Fee (eTravel System Entry Instructions: Enter details shown below in the Payment Request)				
\$	Vendor ID:			
<input type="checkbox"/> Mail check	Payee Name (check issued to):			
<input type="checkbox"/> Hold Check	Payee Mailing Address:			
<input type="checkbox"/> Cash Advance (eTravel System Entry Instructions: Enter details shown below in the Payment Request)				
\$	Note: Traveler must sign the Cash Advance Form generated in the eTravel System			
Eligibility Criteria:	<input type="checkbox"/> Student Traveler	<input type="checkbox"/> Faculty/Staff International Travel (30+ days)		
	<input type="checkbox"/> Faculty/Staff Student Group Advisor	<input type="checkbox"/> Eligibility Exception (Dean/VP approval)		

APPROVAL (optional – this section should be used as deemed necessary by the using department)	
Approval Signature:	Date:

ADDITIONAL DETAILS / INSTRUCTIONS (optional)