

*Department Submit Original to College Office
One Week in Advance of Interview*

**CAMPUS INTERVIEW--FACULTY RECRUITMENT
REQUEST FOR AUTHORIZATION FOR REIMBURSEMENT
OF TRANSPORTATION EXPENSES**

Department: _____

Reference No: _____

Date: _____

Name of Applicant _____
Last First Middle

Social Security No. _____

Home Address _____

City State Zip

Travel of applicant from _____
to Long Beach and return (City/State)

Travel Dates _____

Position for which applicant will be interviewed _____

Anticipated Transportation Costs (Please refer to applicable state travel guidelines):

Round trip coach airfare \$_____

Ground transportation/Parking \$_____

Lodging/Per diem ____Days \$_____

TOTAL \$_____

Department Chair Signature

Date

APPROVAL	CHARTFIELD
Signature: _____ Date: _____ <i>Dean/Designee</i>	Amount Authorized: _____ _____ <i>Account Fund Dept ID Program</i>
Signature: _____ Date: _____ <i>Provost/Designee</i>	Amount Authorized: _____ _____ <i>Account Fund Dept ID Program</i>