



Business Travel Application Form

Employee Details

Name		KFUPM ID#	
Department/Center		Location	
Job Title		Mobile #	

Travel Details	Business Trip Period	From	To	Total # of hours/days	
	Destination				
	Type of Business Trip	Planned	<input type="checkbox"/>	Emergency	<input type="checkbox"/>
	Purpose of Travel				
	Return to Work				

Transportation Details	Ticket Class		Land transportation	Private	<input type="checkbox"/>	KFUPM	<input type="checkbox"/>
	Departure Date & Time		Approximate Distance in km (land transportation)				
	Return Date & Time		Exit & Re Entry Visa & Foreign Visa required:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Other travel arrangements						

Employee Acknowledgement

I undertake to commit to the Per Diem days and return to work on time. I understand that a detailed and duly signed trip report will be submitted along with the Per diem request to be processed.

Signature _____
Name _____
Date _____

Department/Center Approval

Signature _____
Director/Chairman _____
Date _____

Director of Contract Administration Unit

Director General of Research Support Department

Mr. Mansour Ibraheem Al-Marhoon

Mr. Mohammad Abdulaziz AL-Suwaiye

Vice President's Approval

Approved

Not Approved:

Non-Approval Reason:

Signature:
Date:

President's Approval

Approved

Not Approved:

Non-Approval Reason:

Signature:
Date: