



THE UNIVERSITY OF TENNESSEE
SOUTHERN

Division of Student Affairs

UTS RSO TRAVEL FORM

Contact Information:

Organization Name _____

Advisor _____

Advisor Email _____

Travel Contact _____

Contact Email _____

Contact Phone _____

Event Details

Event/Travel Title _____

Event/Travel Description: (Please describe the details of event/travel: destinations, number of days, accommodations, etc.)



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Travel Dates _____ to _____

Travel to Destination

Departure Time: _____ Travel Time: _____ Arrival Time: _____

Return to Campus

Departure Time: _____ Travel Time: _____ Arrival Time: _____

Event Logistics

1) How many students are you expecting on the trip? _____

2) How many advisers/chaperones are you expecting on the trip? _____

3) Will you be requesting the use of a college vehicle? YES NO

4) Will student miss class for the trip? YES NO

*Please note that filling out this form DOES NOT substitute for reserving campus resources. Once your event/travel is approved and on the master calendar, you must formally request campus services.

3) If you will be collaborating with another student organization or some other group to host this event, please add a name and organization. Otherwise add "N/A"



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What is the contact email for the co-hosting organization?

4) Will you need to pay an outside agency for/during your Travel? What is the Budget?

5) Will you be charging student for this event/travel?

If yes, then what is the money being collected towards?

Campus Approval:

Vice Chancellor of Student Affairs

Provost (Academic Related Presentation)



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