UNIVERSITY of HOUSTON

DIVISION OF STUDENT AFFAIRS

Campus Recreation

University of Houston
Sport Club Program

Student Travel Roster

Travel request number (if applicable) _____
Name of student, organization, or team: _____
Contact phone numbers during travel:_____
Department/college or division: _____
Destination: _____
Dates of Travel:_____
Purpose of Travel: _____
Mode of Transportation:_____
Total number of travelers: _____
Signature: _____

Traveler	I.D. #	Emergency Contact Name/Phone #	Release Form (Y/N)

Office Use Only

SC Approval: _____ **Date:** _____ **Amount Requested:$**_____
Signature

Notes: _____

_____	**Y or N**	_____
Points Awarded	**Updated**	**Initials**