



**GLENVILLE**  
**STATE UNIVERSITY**

## Travel Request

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Residence Hall/Room #: \_\_\_\_\_

Destination and Reason for Travel:

\_\_\_\_\_

### Departure Information

Date: \_\_\_\_\_ Airline: \_\_\_\_\_

Flight No.: \_\_\_\_\_ Time: \_\_\_\_\_

### Return Information

Airport/Pickup Location: \_\_\_\_\_

Date: \_\_\_\_\_ Airline: \_\_\_\_\_

Flight No.: \_\_\_\_\_

Return Departure Time: \_\_\_\_\_ Return Arrival Time: \_\_\_\_\_

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Return this form to Cody Moore either in person or by email ([cody.moore@glenville.edu](mailto:cody.moore@glenville.edu)) no later than December 11, 2024. You will be contacted with pick-up information.

If you have any questions, please call 304-462-6240