UNIVERSITY OF TECHNOLOGY SARAWAK

**EDUSAR RESOURCES SDN BHD.** (969673-X)

No. 1, Jalan Universiti, 96000 Sibu, Sarawak. Tel: +6084-367300 Fax: +6084-367301

**TRAVELLING REQUISITION FORM**

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|  |
| --- |
| **A- REQUISITION DETAILS** |
| No. | Name | Designation | Department / Faculty |
| 1 |  |  |  |
| DETAILS OF JOURNEY |
| Date | Depart. Time | Arrival Time | Departure Place | Arrival Place | Mode of Travelling | Owner / Car Reg. No. |
|  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |
|  |
| Reason for travelling: |  |
|  |
| Is Accommodation required? | Place / City | Check-in date | Check-out date | Remarks |
| Yes |  |  |  |  |  |  |
| No |  |  |  |  |  |  |
|  |
| Is Advance required? | Yes |  |  | If required please fill up the Advance Requisition In Part B Below |
|  |  |  |
| No |  |  |
| **B. FOR ADVANCE REQUISITION ONLY** |
| Date | Particulars | Transport | Accommodation | Subsistence | Other | Total |
| KM | RM | RM |  | RM | RM | RM |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Total Advance required |  |
|  |
| Requested by : | **C. RECOMMENDATION / APPROVAL** |
| Recommended by Immediate Supervisor (If Any) | Approved by HOD : |
| Name: |  |  |  |  | Name : |  |  |  |  | Name : |  |  |  |  |
| Designation : |  |  |  | Designation |  |  |  |  | Designation : |  |  |  |
| Date : |  |  |  |  | Date : |  |  |  |  | Date : |  |  |  |  |
|  |  |  |  |  | ***\* International Travelling Needs Approval From Vice Chancellor*** |
| **FOR FINANCE USE ONLY** |
| Received by : | Verified by : | Approved by : |
| Name: |  |  |  |  | Name: |  |  |  |  | Name: |  |  |  |  |
| Designation : |  |  |  | Designation |  |  |  |  | Designation : |  |  |  |
| Date : |  |  |  |  | Date : |  |  |  |  | Date : |  |  |  |  |

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*\* Reservation of Flight & Hotel to be made only after approval*

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