

**Department of Computer Science
Request for Travel
Teaching Assistants/Research Assistants**

Name: _____

SSN: _____

Dates of Travel: _____

Destination: _____

Contact Person and Number at Destination: _____

Contact Person and Number at UTD: _____ **000-000-0000**

Reason for Travel: _____

Arrangements Made to Cover TA/RA Responsibilities: _____

TA/RA Signature _____

Date: _____

Substituting TA/RA _____

Date: _____

Faculty Supervisor _____

Date: _____

Approved/Committee _____

Date: _____