

McLennan Community College
Student/Group Travel Form
(Complete and attach to MCC Travel Form)

Name of group: _____

Group Sponsor: _____

Travel Itinerary

Transportation __by plane (airlines-_____

 __by college vehicle

 __by personal vehicle (license number, state-_____

 __other-_____

Date and time of departure _____

Date and estimated time of arrival at destination _____

Lodging

 Name of hotel/motel _____

 Address_____ Phone number_____

Address and phone number, if other than above, where you may be reached:

Date and time of departure for return to MCC _____

Date and estimated time of arrival back at MCC _____

MCC Student/Group Travelers

Name

Student ID Number

_____	_____
_____	_____
_____	_____
_____	_____

Also, please complete the Excel document **Travel Form** found at:
L:\Forms\Business Office