

# VOLUNTARY ACTION SHETLAND

## TRAVEL REQUEST APPROVAL FORM VAS STAFF AND VOLUNTEERS

NAME: .....

REASON FOR TRAVEL: .....

Flights:

| FROM | TO | DATE | TIME |
|------|----|------|------|
|      |    |      |      |
|      |    |      |      |

Train:

| FROM | TO | DATE | TIME |
|------|----|------|------|
|      |    |      |      |
|      |    |      |      |

Accommodation:

| Hotel | City | Date(s) |
|-------|------|---------|
|       |      |         |

SIGNED: ..... staff member/volunteer

Public Transport must be used where possible – Bus/Tram/Ferry

**Please retain all receipts for reclaiming**

Are the above travel costs reclaimable? YES/NO (delete as appropriate)

Name of organisation reclaimable from:.....

If yes, please provide Finance Officer with a copy of your completed claim.

Travel to be approved

by Executive Officer ..... Date .....