

TRAVELER CERTIFICATION FORM

Name [Please Print]: _____

Title _____ Home Campus: _____

* Lola User Name: _____ ** Employee ID #: _____

Supervisor Name: _____

Dean/Department Head Name: _____

* This is the username that you enter to logon to LOLA. It is typically, your first and last name, possibly followed by a number.

** This is your employee ID that typically begins with an "L". It can be found on your paystub or your employee profile in LOLA self-service.

AGREEMENT

PLEASE READ AND INITIAL EACH LINE PRIOR TO SUBMISSION

- _____ 1. I acknowledge that PPM49 is the State Travel guide and must be followed for all college travel. I am responsible for familiarizing myself with the State Travel Guide prior to requesting to travel.
<https://www.doa.la.gov/pages/osp/travel/TravelPolicy.aspx>
- _____ 2. I have read SLCC's published travel procedures.
<https://www.solacc.edu/about-us/travel-forms>
- _____ 3. I understand that ChromeRiver Expense is the official method for requesting to travel. I have received training on using this system. I will ensure all necessary documentation is submitted with my pre-approval and expense reports (including receipts for expenses paid directly by the college).
- _____ 4. If my travel preapproval request includes a **registration fee, airfare, hotel**, and/or a **rental vehicle**, I understand that in order for my travel to be reviewed, considered, approved, and processed, I must submit a request a minimum of 3 weeks prior to early registration ending, conference hotel rates expiring, or travel beginning (whichever is earlier). Any submission less than 3 weeks prior to travel may not be approved based on the multiple levels of approvals and processing time.
- _____ 5. I acknowledge that there are risks associated with travel (i.e., delayed flights). I understand that it is my responsibility to cover any costs associated with unexpected travel situations and that reimbursement will be in accordance with PPM49.

Signature of Traveler: _____ Date: _____

Submit completed form to travel@solacc.edu

Upon receipt, the Accounting Department will add the traveler to the Approved Traveler List. If no form is on file and travel is requested, the traveler will be notified that travel is denied until training is complete and form is submitted.

For Internal Use Only:

Date Received: _____

Date of Training: _____ Method of Training: _____

Received by: _____ Date Entered to Log: _____