**TRAVEL EXPENSE MODULE NON-EMPLOYEE SETUP FORM**

***Note: All information below is required. Forms with missing or incomplete information will be returned. All payments to non-employees will be made by check.***

**Requestor’s Name:**       **Requestor’s Email Address:**

|  |  |
| --- | --- |
| Traveler Full Name |       |
| Traveler Address\* | Street/PO Box:       |
| City:       | State:       | Zip:       |
| Dates of Travel |       to       |
| Business Purpose |       |
|  | Fund       | Dept ID       | Program       | Project       |
| Alternate Information (UW Employee who will be entering the Travel Expense information in the module. At least one alternate must be established, may enter more if desired.) |
| Name | Empl ID | Email address |
|       |       |       |
| Additional Comments |       |  |
|  |  |  |
|  |  |

\* If traveler is a non-US Resident for tax purposes please indicate this in your email submitting this form to obtain information on additional documentation required.

Please email this completed form to travel@uwosh.edu