

REQUEST FOR OFF-CAMPUS RECRUITING/PROFESSIONAL DEVELOPMENT FORM

This form MUST be filled out completely and turned into the Manager of Fiscal Operations once all signatures have been obtained. Approval and sign off MUST be secured prior to any arrangements being made.

Sport Coach

Date(s) of Trip Destination (City and State)

Activity (e.g., HS game [list teams], Las Vegas Tournament, practice, open gym, home/school visit **OR** professional development)

Recruiting ONLY (✓all that apply): Contact Observation Evaluation Home Visit School Visit

Prospect's Name(s): _____

Mode of Transportation (✓all that apply): Personal Vehicle Airline Rental Car

ESTIMATED COSTS:

Meal Per Diem \$ _____
Lodging \$ _____
Mileage _____ X 58.5 cents = \$ _____
Airfare \$ _____
Rental Car \$ _____
Taxi \$ _____
*Miscellaneous \$ _____
* (Registration fee, admissions, parking, tolls, etc)

Total Estimated for Trip: \$ _____

Amount Budgeted for Trip: \$ _____

Advance Amount Requested \$ _____

Head Coach's Signature

Date

Sport Administrator's Signature

Date Approved Denied

Assistant A.D./Compliance's Signature (**recruiting only**)

Date Approved Denied

Manager of Fiscal Operations' Signature

Date Approved Denied

Cc Assistant A.D./Compliance
Head Coach