

# CANADA TRAVEL REQUEST FORM

Department/Unit: \_\_\_\_\_ Employee ID: \_\_\_\_\_

## Employee Information:

Full Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Travel Details:

Destination(s): \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

Departure Date and Time: \_\_\_\_\_

Return Date and Time: \_\_\_\_\_

## Travel Arrangements:

Transportation Mode(s): \_\_\_\_\_

Accommodation Details: \_\_\_\_\_

Estimated Travel Costs (CAD): \_\_\_\_\_

## Approval Section:

Supervisor/Manager Name: \_\_\_\_\_

Supervisor/Manager Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Employee Declaration and Agreement:

I certify that the information provided in this Travel Request Form is true and complete to the best of my knowledge. I understand and agree to comply with all applicable governmental regulations, internal policies, and procedures related to travel. I acknowledge that all expenses must be reasonable, necessary, and directly related to the performance of my duties.

## Privacy and Data Protection Notice:

The personal information collected on this form is collected, used, and disclosed in accordance with the Privacy Act and applicable provincial privacy legislation, solely for the purpose of travel authorization and related administrative functions. Access to this information is restricted to authorized personnel only.

## Terms and Conditions:

By submitting this form, the traveler agrees to adhere to all travel policies and guidelines established by the organization and applicable laws in Canada. The organization reserves the right to approve, modify, or deny travel requests based on business needs, budget constraints, or compliance concerns. Any fraudulent or unauthorized use of

travel funds may result in disciplinary action, including termination and possible legal proceedings.

**Signatures:**

**EMPLOYEE SIGNATURE**

**SUPERVISOR/MANAGER SIGNATURE**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

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