



Student Roster

Requester: _____
 Travel Advisor: _____
 Event Name: _____
 Destination: _____

of Students: _____
 Date(s): _____
 Start Time: _____
 End Time: _____

Meal Money Amount per student (if applicable): _____

900#	Student Names	Signature	Roll Call
1			<input type="checkbox"/>
2			<input type="checkbox"/>
3			<input type="checkbox"/>
4			<input type="checkbox"/>
5			<input type="checkbox"/>
6			<input type="checkbox"/>
7			<input type="checkbox"/>
8			<input type="checkbox"/>
9			<input type="checkbox"/>
10			<input type="checkbox"/>
11			<input type="checkbox"/>
12			<input type="checkbox"/>
13			<input type="checkbox"/>
14			<input type="checkbox"/>
15			<input type="checkbox"/>
16			<input type="checkbox"/>
17			<input type="checkbox"/>
18			<input type="checkbox"/>
19			<input type="checkbox"/>
20			<input type="checkbox"/>
21			<input type="checkbox"/>
22			<input type="checkbox"/>
23			<input type="checkbox"/>
24			<input type="checkbox"/>
25			<input type="checkbox"/>

**If more than 25 students travelling, include additional signed forms.*

Attach your Board approved Pre Approval to the Student Roster and then forward to the President's office via Adobe Sign for review, approval & signature; cc: travel@avc.edu, and also include mluna3@avc.edu and dkoss1@avc.edu from the Cashier's Office for meal money requests.

The Cashier's Office requires 10 Calendar Days to process Meal Money Requests. Student Roster updates must be sent to the Cashier's Office 24 hours prior to pick-up. Funds not picked up will be deposited two days after the trip is

Date Board Approved: _____ Pre Approval # _____
 President's Signature: _____ Date: _____

Received: _____	(Purchasing Use ONLY)
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