Nunatsiavut Government – EDUCATION DIVISION



NUNATSIAVUT GOVERNMENT P.O. Box 116 Makkovik, NL AOP 1JO Email: education@nunatsiavut.com Website: www.Nunatsiavut.com

Telephone: (709) 923-2105 Toll Free: 1-877-923-2171 Fax: (709) 923-2347



Student Travel Request Form

Student Name:	
Institution:	
Mailing Address (while in training):	
 City/Town:	
Province: Postal Code:	
Email Address:	
Purpose of Travel:	
•	Orientation Chaperone Extra Trip
	dcare Provider 🗆 Alternate Method of Travel
□ Alternate Travel Time (for Childcare Provide	
- Creduction Cuest Orientation Change	one Childrene Drevider Information (if applicable).
-	one Childcare Provider Information (if applicable):
Name: Address:	
Address.	
City/Town:	
Province:	
Postal Code:	
Email Address:	Phone #:
Travelling from:	Travelling to:
Departure date:	Return date:
Method of Travel:	
Student Signature:	Date:
For office use only:	
Approved by:	Date:
Notes:	

Travel Disclaimer:

Student:

 \Box I hereby certify that the amount indicated above are correct and that all expenditures claimed will be on Nunatsiavut business.

□ I understand that if the advance will be for a guest/chaperone, their amount will be deposited into my (the funded student's) bank account and I will forward my guest's share to him/her/them.

□ I have attached a copy of my itinerary to this form.

□ I understand that if my travel itinerary changes and I/we return early or leave late, I/we will repay the Nunatsiavut Government any balance owing from the advance.

Guest:

As a guest, travelling with: _____

I understand that:

The Nunatsiavut Government-Education Division, will cover expenses related to my travel that include airfare (if flying), ground transportation (if driving), accommodations (private &/or hotel), meals (according to NG rates), and taxi (only applicable for Orientation Chaperone & Bad Weather Allowance)
WAIVER OF RESPONSIBILITY

Amount deposited into student account: \$	
Student Amount Advanced: \$	
Student Signature:	Date:
Guest Amount Advanced: \$	
Guest Signature (if applicable):	Date:

Verified by: Notes:	Date: