## Hotel Request Form

This form is to be filled out with the Employee Absence Report if needing a Hotel during your trip. Please fill this form out and attach it with your Absence Report so that your Hotel reservation can be made promptly.

| Request:               |                                 |
|------------------------|---------------------------------|
| Requestor Name:        | Date:                           |
| Hotel Name:            |                                 |
|                        | Total Number of Rooms:          |
| Check-In Date:         | Check-Out Date:                 |
| Type of Room: King     | Two Double Beds                 |
| For Office Use Only    |                                 |
| Reservation Info       | 771 //                          |
|                        | Phone #:                        |
|                        |                                 |
| Check-In Date:         | Check-Out Date:                 |
| Room Rate: \$          | Room Type: King Two Double Beds |
| Reservation #:         | Total for Stay: \$              |
| Total Number of Rooms: | Credit Card Authorization Form: |
| Payment Type:          | Date Made:                      |

Please submit your Hotel Request Form at least 2 weeks before your absence, along with your Employee Absence Report. If form is not submitted to the District Administration office 2 weeks before trip, we cannot guarantee rooms will be available at your requested hotel.