eWaiver Request Form Office of Purchasing and Travel

This form is to be used to request an eWaiver from any of the standard travel procedures set forth in the Office of Purchasing and Travel, Travel Manual. The request should be submitted via email to travel@dfa.ms.gov prior to making any reservations or commitments.

Date:	Agency:		
Name of Travel	er:	Phone:	
Return eWaiver	via E-Mail to:		
Travel Date(s):			
Destination(s):			
Purpose of Trav	/el:		

Amount of Reimbursement Requested: _____

- Requesting authority to pay an amount greater than state contract
- Requesting authority to rent a vehicle with a cost greater than the intermediate size on state contract
- ____ Requesting authority to purchase vehicle rental insurance
- _ Requesting authority to rent a vehicle not on current contract
- Requesting authority to pay a hotel other than the conference hotel
- _ Requesting authority to pay greater than the least expensive cost comparison for airline tickets Other

Please explain your request. Include any and all information which would prove that approval of the eWaiver would be economical and in the best interest of the state and/or the approval of the eWaiver is necessary for some other reason. Failure to provide adequate information will be cause for delays and potentially the rejection of the request (attach additional pages if needed). We must be able to determine the anticipated cost to the state and any anticipated savings. You must include all applicable cost information (example: cost comparisons showing savings, conference hotel rate vs. actual rate paid, etc.).

Agency Approval Agency Head or Designee Date Approved: