

## TRAVEL AUTHORIZATION FORM

## NO REGISTRATIONS OR RESERVATIONS SHOULD BE MADE UNTIL ALL APPROVALS ARE OBTAINED

<u>Instructions:</u> Complete all sections pertaining to your request. **Print or Type** all entries. Submit completed form with all necessary approvals to your **Agency's Travel Administrator**. Retain a copy for your records.

SECTION A: General Information- Complete all info Name (Add additional travelers in Section D if applicable)				Travel Destination				
Title				Begin Date		Enc	d Date	
Agency Name Division/Section				Mode of Transportation				
Purpose/Justification for Travel (Benefits to your agency)								
SECTION B: Type of Travel (Select all that apply)			S	SECTION C: Estimated Expenses Per Traveler (Attach breakdown if neede				
Conference/Seminar * Annual Auth. For Routine Travel				Registration Fees: Airfare Costs:				
☐ In-State Travel ☐ Out-of-State Travel ☐ Weekend Travel ☐ Vehicle Rental ☐ Use of Personal Vehicle			P	Personal Car Mileage Costs (\$0.62/mile):				
			L	odging	\$	x Nig	ghts =	
			M	Ieals S	3	x Nig	ghts =	
☐ 50% Allowance above Tier Lodging Rate ☐ Other (Please attach explanation)  * REQUIRED DOCUMENTATION: If reason for trip is a Conference or Seminar, a brochure or agenda is required to be				Other - (Taxi/Shuttle/Incidental Tips):				
				Cost Per Traveler (excluding rental car):				
				Car Rental Yes No				
attached to this form.			N	Number of Travelers: TOTAL:				
SECTION D: Additional Travelers								
Traveler Name				Traveler Job Title				
SECTION E: Age	SECTION E: Agency Accounting							
Cost Center General Ledger		Fund # O		rder #	Grant #	WBS Eleme	ent   Functional Area	
SECTION F: Approval Signatures								
Section Head Signature		Date		Department Head Signature			Date	