TRAVEL AUTHORIZATION FORM

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

Instructions: 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** **End 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)

- ☐ **Conference/Seminar ***
- ☐ **Annual Auth. For Routine Travel**
- ☐ **In-State Travel**
- ☐ **Out-of-State Travel**
- ☐ **Weekend Travel**
- ☐ **Vehicle Rental**
- ☐ **Use of Personal Vehicle**
- ☐ **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 attached to this form.

SECTION C: Estimated Expenses Per Traveler (Attach breakdown if needed)

Registration Fees:	
Airfare Costs:	
Personal Car Mileage Costs ($0.67/mile):	
Lodging $ [ ] x [ ] Nights =	$ 0.00
Meals $ [ ] x [ ] Nights =	$ 0.00
Other - (Taxi/Shuttle/Incidental Tips):	
Cost Per Traveler (excluding rental car):	**$ 0.00**
Car Rental Yes ■ No ☐	
Number of Travelers: 1 TOTAL:	**$ 0.00**

SECTION D: Additional Travelers

Traveler Name	Traveler Job Title

SECTION E: Agency Accounting

Cost Center	General Ledger	Fund #	Order #	Grant #	WBS Element	Functional Area

SECTION F: Approval Signatures

Section Head Signature	Date	Department Head Signature	Date