

Travel Authorization Request

This form is to be submitted in duplicate and transmitted through the Department Chair and/or Program Leader by faculty, Extension educators and staff members as a request for authorization for out-of-state travel exceeding one day's duration. It should be submitted 10 days in advance of date of departure. One copy will be filed with the supervisor and one returned to the individual.

Name: _____ Date: _____

Department: _____ Title: _____

Purpose of Travel: _____

Destination: _____

Date of Departure: _____ Date of Return: _____

Means of Travel: _____ Transportation Costs: _____

If by car, name of others in vehicle: _____ Hotel Expenses: _____

_____ Meals: _____

Registration: _____

Travel Classification:

- 9 Institutional Administration
- 9 Professional and Scientific Meetings
- 9 Official Delegate
- 9 Instruction Trip
- 9 Judging Trip
- 9 Extension and Experiment Station Work
- 9 Other _____

Other Expenses: _____

Total: _____

Source of Funds: _____

Personal Share: _____

Approved:

Department Chair and/or Program Leader

Date