

Home Address: (required) _

TRAVEL AUTHORIZATION FORM

Out-of-State *

(MUST BE COMPLETED PRIOR TO TRAVEL)

In-State

(please check all that apply)

		Pers	sonal Vehicle	State Vehicle	
		PER	PERMISSION ONLY (check only if reimbursement is not expected)		
Employee:	Funding Source:		Today's Date:		

Date(s) of Trip: Destination:	Estimated Duration:			
Date(s) of Trip: Destination: (city and state) Purpose of Trip: Destination: (city and state)			(1 hr, 1 day, etc.)	
		(FOR CBO USE ONLY)	
	ESTIMATED		FOAPAL:	
AIRFARE (reimbursement will require receipt)	\$	\$	# Date	
MILEAGE: Miles @ 65.50 cents per mile (NEW 1/1/2023)	\$	\$	#	Date
PARKING (receipts will be required)	\$	\$	#	Date
TOLLS (receipts will be required)	\$	\$	#	Date
GROUND TRANSPORTATION: Taxi, Bus, specify (receipts will be required)	\$	\$	#	Date
REGISTRATION FEE: attach registration form (College to Pay Fee)	\$	\$	#	Date
LODGING & TAX per night (receipts will be required) \$X# of nights (Need Federal ID # and confirmation plus receipt for reimbursement)	\$	\$	#	Date
MEALS (<u>Full-Travel Status</u>) Breakfast (#) @ \$8.00 = Lunch (#) @ \$12.50 =		\$	#	
Dinner (#) @ \$20.00 =				Date
MISCELLANEOUS: (Please specify. Receipts will be required)	\$	\$	#	Date
TOTAL:	\$	TOTAL: \$		

SIGNATURES:

Note: The traveler cannot be the "only" signature (a counter-signature is required)

SIGNATURE OF TRAVELER: (always required)	DATE:
COST CENTER HEAD/GRANT DIRECTOR:	DATE:
(1)	
(always required)	
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APPROPRIATE DIVISION VICE PRESIDENT:	DATE:
(required when total costs exceed \$999)	
(required when total costs exceed \$999)	
EXECUTIVE VICE PRESIDENT:	DATE
(required when total costs exceed \$4,999)	
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PRESIDENT /President's Designee:	DATE:
* (required on <u>ALL</u> "out-of-state" travel)	

RULES: 1. No travel will be approved and no claims for reimbursement will be paid without approved travel authorization PRIOR TO TRAVEL.

2. Hotel vouchers, registration fee receipts, etc. must be submitted immediately upon completion of trip.

(*** AT THE COMPLETION OF TRAVEL, PLEASE SUBMIT A TRAVEL REIMBUSREMENT FORM***)