

Travel Authorization

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|--|--|--|------------------------------------|----------------------------------|-----------------|
| Date Submitted | | | | | |
| | Out-of-State Travel | | Excess Registration | | In-State Excess |
| | Out-of-Country Travel | | Blanket Travel Authorization | | Initial Request |
| | Out-of-County Travel | | Request for Additional Information | | Revised Request |
| | Reimbursement Authorization for Non-State Employee | | Excess Subsistence | | Other |
| Traveler | | | | | |
| Travel To: | | | | Grant Name: | |
| Mode of Transportation: | | Subsistence Expenses (maximum per day) | | Convention Registration (amount) | |
| | | \$ | | | |
| Total Estimated Expenditures: | | Beginning Date of Travel: | | Ending Date of Travel: | |
| \$ | | | | | |
| Purpose of Travel and Explanatory Remarks: | | | | | |

APPROVAL

Applicant

Date

Immediate Supervisor

Date

Vice President

Date

President

Date

Sponsored Programs Compliance Coordinator

Date

Amount of Travel Advance Requested

Travel Advance Approved (initials of vice president)

Budget Code (s)

Approval by the State President

Date