



Travel Authorization Form

Please fill out the information below for any university related travel prior to the trip. If you are using awards money, please provide the award letter. Upon completion bring all receipts for reimbursement, list any meals that need to be covered, and bring schedule or selection from the program.

Name: _____

Travel Dates:

Beginning: _____ **Ending:** _____

Destination & Purpose: *(ex: San Francisco, CA; ACS Meeting)*

Funding Project Number: _____

Any additional funding or awards:

Please Check Covered Expenses:

- | | | |
|-------------------------------------------|----------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Registration Fee | <input type="checkbox"/> Taxis, Trains, etc. | <input type="checkbox"/> Parking |
| <input type="checkbox"/> Hotel | <input type="checkbox"/> Meals | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Airfare | <input type="checkbox"/> Car Rental | <input type="checkbox"/> Other, please list: |
| <input type="checkbox"/> Baggage Fees | <input type="checkbox"/> Fuel | _____ |

Faculty Signature: _____