TRAVEL AUTHORIZATION

(Rev 9/2010)

An approved TA must be submitted to the Travel Office at least two weeks prior to travel

TA#
☐ ORIGINAL ☐ REVISED
DATE

TRAVELERS NAME	WORK PHONE/EXT
BANNER ID #	E-MAIL

STATUS (EX: FT FAC, FT STAFF, STUDENT, ETC.)

COLLECTIVE BARGAINING UNIT: ☐ AAUP ☐ MGMT ☐ SUOAF-AFSME ☐ OTHER

ITINERARY		DEPART		RETURN		CARRIER INFO
HOME/DUTY STATION	TO	DATE	HOUR	DATE	HOUR	AIR/RAIL/BUS/AUTO

OBJECT AND NECESSITY OF TRAVEL (attach relevant travel documents Ex: Conference announcement)

TYPE OF TRANSPORTAION

☐ AIR (IF FLYING OUT OF BRADLEY A P ARKING PERMIT IS REQUIRED) PERMIT REQUESTED? ☐ YES ☐ NO

☐ PERSONALLY OWNED CAR ☐ STATE OWNED VEHICLE

(COPY OF DECLARATION PAGE OF INSURANCE POLICY REQUIRED. ATTACH LIST OF ADD'L RIDERS)

	Yes	Vendors FEIN # (Mandatory)	Amount	For Accounts Payable Use Only	
				Inv #	Ck Date
Prepay Registration					
Prepay Lodging/Hotel					
Travel Advance					

Airfare/Rail	P-Card ☐		Lodging/Hotel (incl tax)	P-Card ☐	
Taxi	P-Card ☐		Meals (Per Diem Rate $) www.gsa.gov		
Rental Car (attach justification)	P-Card ☐		Registration	P-Card ☐	
Personal Mileage ____@MI _____Rat		$0.00	Other	P-Card ☐	
Parking/Toll			**TOTAL ESTIMATED COSTS**		$0.00

FUND	ORG	ACCT	AMOUNT	BUDGET AUTH APPROVAL

Travelers Signature:		Date:
Supervisor/Approving Auth:		Date:
Budget Auth (if different than Supervisor):		Date:
Chair/Dean/VP:		Date:
President:		Date:
Travel Office:	Date:	Encumbered: