

REQUEST FOR TRAVEL AUTHORIZATION

TRAVELER:

UFID:

DESTINATION:

DATE OF DEPARTURE:

DATE OF RETURN:

Will you miss any teaching duties?

If so, what arrangements have you made?

What is the purpose of this trip?

What benefits to the state (and grant if applicable) will this trip give?

Source	Expense
Airfare	\$
Registration	\$
Lodging	\$
Meals	\$
Car Rental	\$
Mileage	\$
Incidental Expenses	\$
Shuttle/Taxi	\$
Other	\$
Other	\$
Other	\$
TOTAL	\$

Funding	Requested Amount
Math:	\$
Grant:	\$
Project Number:	
CLAS:	\$
Other:	\$

Total Expense:

TRAVEL APPROVED TRAVEL DISAPPROVED MATH CONTRIBUTION: \$ _____

DATE: _____

SIGNED: _____

Douglas Cenzer, Chairman