

CLEAR ALL FIELDS

GET NEW FORM

Sample

THE UNIVERSITY OF ARIZONA
TRAVEL AUTHORIZATION

T799261

Date: 5/27/2016

TRAVELER & DEPARTMENT INFORMATION

NAME [Enter Traveler Name]	DEPARTMENT NAME Chemical & Env. Engineering	DEPARTMENT NO. 2803
EMPLID [Enter your Employee ID or Student ID]	DEPARTMENT PO BOX ADDRESS PO Box 211012	ROOM NUMBER Mines 133
<input type="checkbox"/> EMPLOYEE <input type="checkbox"/> STUDENT <input type="checkbox"/> OTHER <small>Check Appropriate Box</small>	CONTACT NAME/TITLE Rose Evans, Business Manager	PHONE NUMBER 520-626-1278

TRAVEL ORDER

BUSINESS PURPOSE OF TRIP: (conference dates) State purpose of travel, include location and dates.	<input type="checkbox"/> IN-STATE <small>Check Appropriate Box</small>	<input type="checkbox"/> OUT-OF-STATE	<input type="checkbox"/> INTERNATIONAL*
	FUNDING SOURCE: Account #		
MODE OF TRANSPORTATION:	DUTY POST: Tucson		
CITY, STATE DEPARTING FROM:	DEPARTURE DATE:		
CITY, STATE RETURNING FROM:	RETURN DATE:		
** ATTACH ITINERARY IF MULTIPLE LOCATIONS **	DESIGNATED LODGING:	<input type="checkbox"/> YES	<input type="checkbox"/> NO <small>Check Appropriate Box</small>

EXCEPTIONS

* INTERNATIONAL TRAVEL

<input type="checkbox"/> Vehicle taken out of state: State-owned Rental Private <input type="checkbox"/> Long-term travel status (if travel will exceed 30 days, state reason) <input type="checkbox"/> Personal time taken (state reason and how long) <input type="checkbox"/> Use of other than coach/economy travel on commercial airlines (state reason) Miscellaneous – explain JUSTIFICATION / REASON: Any special circumstances should be listed here.	INTERNATIONAL TRAVEL REGISTRY #: [enter registry # if traveling international] If you are traveling internationally, you must register your trip through the UA International Travel Registry prior to departure: http://ua-risk.terradotta.com <input type="checkbox"/> TRAVEL ALERTS & WARNINGS If your destination has a Travel Alert or Warning issued by the U.S. Department of State, please complete the supplemental travel information within the UA International Travel Registry. Travel Alerts and Warnings are available at: http://travel.state.gov
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TRAVEL ADVANCES (OPTIONAL)

AMOUNT	ACCOUNT #	DATE REQUIRED	<input type="checkbox"/> CHECK	<input type="checkbox"/> DIRECT DEPOSIT
Important Please Read Before Signing: The University of Arizona is authorized to deduct the amount of the travel advance from any future expense reimbursements or pay due the traveler. The advance must be settled in full within ten days from the return of the trip. In the event these sources are not adequate or in the event of severance of my employment with The University of Arizona, the advance shall become due and payable immediately. It shall bear interest at the rate of 9% annum starting thirty days after the return date of the trip. In the event that it should become necessary to enforce collection of this advance, or any part thereof by suit or otherwise, I do further agree to pay any and all costs of collection including a reasonable attorney' s fee.				
PAYEE SIGNATURE				DATE
**Only sign here if you are requesting a travel advance and complete this section.				

PLEASE USE COLORED INK FOR SIGNATURES SO THAT ORIGINALS CAN BE DISTINGUISHED FROM PHOTOCOPIES

APPROVALS

I HEREBY CERTIFY THAT THE TRAVEL AUTHORIZED ABOVE IS FOR A VALID PUBLIC PURPOSE AND THAT THE FUNDS HAVE BEEN APPROPRIATED OR ARE OTHERWISE AVAILABLE FOR PAYMENT OF ANY CLAIMS MADE HEREUNDER, AND THAT IF THE AVAILABLE FUNDS ARE FROM A FEDERAL GRANT, CONTRACT OR SOURCE, THIS TRAVEL IS AUTHORIZED UNDER THE TERMS OF SUCH GRANT, CONTRACT OR SOURCE. THIS AUTHORIZED DEPARTMENTAL APPROVER/P.I. AND/OR COLLEGE/DIVISION AGREES TO ALL EXCEPTIONS NOTED ON THIS TRAVEL ORDER.			
AUTH. DEPT. APPROVER/P.I.	NAME/TITLE Rose Evans/Business Manager	SIGNATURE	DATE

Please forward completed form to: FSO-Operations, Travel Office, PO BOX 210158, USB 402