Pre Travel Estimate Approval

Submit with an approved Application for Leave Form marked "University Business"

Traveler _____ Employee ID#_____

Traveler e-mail address:_____

Destination (City, State OR Country) From :_____ To: _____

From: _____ To: _____

Departure Date: _____ Time: _____AM/PM

Return Date: _____ Time: _____AM/PM

Purpose of Trip_____

_____

Source of Funds: If a student is presenting at a conference, **PI** may request department support in advance.

Notes

Department Support Approved ($350 US; $500 International; other) $_____

Department Account # _____ $ _____

OSURF# _____ $ _____

Other Source# _____ $ _____

Total Funds Allocation **$** 0 _____

Airfare: (See reverse side for pre-payment instructions and authorized agency) $ _____

Will your airfare be pre-paid by OSU?

YES (please contact Travel Solutions) **NO** (I will not use Travel Solutions;
Itinerary & receipt must be provided w/ reimbursement request)

Rental Car: If primary mode of transportation. $ _____

OSU authorized Dealers - Enterprise or National http://busops.osu.edu/travel_autohotel.php

Personal Auto: _____whole miles @ .50 per mile $ 0 _____

If trip is over 400 miles, indicate lowest airfare.

Total Transportation Expense **$** 0 _____

Meals: For domestic Per Diem Rates: http://www.gsa.gov/perdiem $_____

For International Per Diem Rates: http://aoprals.state.gov/content.asp?content_id=184&menu_id=78

Complete Per Diem Information: http://busops.osu.edu/travel_perdiem.php

Lodging: $ _____

Registration: May be pre-paid by OSU if over $25. Must be requested 10 working days in advance of trip. Pre-pay registration? **YES NO** $ _____

Miscellaneous Expenses:

(taxi, bus, train, tolls, parking, gas for rental car, telephone, internet connection) $_____

Total Estimated Cost of Trip **$** 0 _____

Foreign Travel: Please use currency converter website: http://www.oanda.com/convert/classic

Traveler Signature _____ Date _____

PI Signature _____ Date _____

Department Authorization _____ Date _____

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