

International Travel Request and Approval Form

**** Send completed form to Office of the Provost, 560 H.F. Robinson Building.**

NAME: _____

TRAVEL DATES: _____
(Begin) (End)

AIR TRAVEL
TO/FROM: _____

CAR RENTAL: _____ Yes _____ No

UNIV. CAR: _____ Yes _____ No

PURPOSE OF TRAVEL: _____

ESTIMATED
TOTAL COST: _____

FUND #: _____

POLICY #100: A completed Policy #100 form must be attached to this document. If not, this form will not be approved and will be returned to the requestor.

| APPROVALS: | <u>Signature</u> | <u>Date</u> |
|---------------------------------|------------------|-------------|
| Supervisor | _____ | _____ |
| Acct. Officer (if different) | _____ | _____ |
| Dept. Head | _____ | _____ |
| Dean | _____ | _____ |
| Provost/VC | _____ | _____ |
| Chancellor | _____ | _____ |

Please return approved form to _____ in the department of _____,
(traveller or departmental secretary)