

DATE:



TRAVEL AUTHORIZATION

THIS FORM IS REQUIRED TO BE COMPLETED AND APPROVED BEFORE TRAVEL DATE. THIS FORM SERVES AS AN ESTIMATE OF EXPENSES FOR TRAVEL

NAME OF TRAVELER:
PSU ID# OF TRAVELER:
EMAIL OF TRAVELER:

SIGNATURE & DATE OF TRAVELER:

I certify that this trip is for the benefit of the University; that required monies are budgeted and allotted for expenditures; and that the trip is in accordance with all relevant travel regulations.

Contact Person & Extension
Email/Mail Code

DEPARTURE/DESTINATION & RETURN - Detailed Daily Itinerary attached (REQUIRED)

Table with columns: Date (mm/dd/yy), Time (hh:mm), From, To

BUSINESS PURPOSE OF TRIP: Describe the relationship of the travel to the mission of PSU and/or statement of work in the sponsored project.

Empty box for Business Purpose of Trip

AIR (coach) Uniglobe Azumano Journeys
Non-contracted source
Amount

GROUND TRANSPORTATION & MISC. EXPENSES
Car Rental Shuttle/Parking
Other (Specify)
Amount

LODGING
Dates Through # of Nights Rate (incl. tax)
Amount
Lodging Address/Hotel:
Phone #:

CONFERENCE REGISTRATION
Paid by PSU P-Card Paid by Personal Credit Card Other
Amount
City/State:
Conference-site Brochure attached (REQUIRED for Conference Travel)

ALLOWABLE MEALS (Exclude meals covered by conference registration and hotel)
Day(s) Per Diem X =
Amount

Table with columns: INDEX, ACCOUNT CODE, AMOUNT, Total Trip Amount

All funding sources are required to complete box 1 below. Expenditures on Sponsored Projects must also complete box 2 below.

Box 1 DEPARTMENT APPROVAL
Box 2 SPONSORED PROJECTS APPROVAL

TRAVEL REIMBURSEMENT REQUEST WITH A COPY OF THIS AUTHORIZATION ARE DUE TO UFS NO LATER THAN 60 DAYS FOLLOWING THE LAST DATE OF TRAVEL