



TRAVEL AUTHORIZATION

(Rev 7/2018)

****An approved TA must be submitted to the Travel Office at least two weeks prior to travel****

TA#	
ORIGINAL	REVISED
DATE	

TRAVELERS NAME	WORK PHONE/EXT
BANNER ID #	E-MAIL

STATUS (EX: FT FAC, FT STAFF, STUDENT, ETC.)	DEPARTMENT
COLLECTIVE BARGAINING UNIT: AAUP MGMT SUOAF-AFSME OTHER	

ITINERARY		DEPART		RETURN		CARRIER INFO
HOME/DUTY STATION	TO	DATE	HOUR	DATE	HOUR	AIR/RAIL/BUS/AUTO

OBJECT AND NECESSITY OF TRAVEL (attach relevant travel documents Ex: Conference announcement)

TYPE OF TRANSPORTAION
 AIR (IF FLYING OUT OF BRADLEY A PARKING PERMIT IS REQUIRED) PERMIT REQUESTED? YES NO
 PERSONALLY OWNED CAR STATE OWNED VEHICLE
 (COPY OF DECLARATION PAGE OF INSURANCE POLICY REQUIRED. ATTACH LIST OF ADD'L RIDERS)

	Yes	Vendors FEIN # (Mandatory)	Amount	For Accounts Payable Use Only	
				Inv #	Ck Date
Prepay Registration					
Prepay Lodging/Hotel					
Travel Advance					

Airfare/Rail P-Card or Foreign Wire	Lodging (incl tax) P-Card or Foreign Wire
Taxi P-Card	Meals (Per Diem Rate \$) www.gsa.gov
Rental Car (attach justification) P-Card	Registration P-Card or Foreign Wire
Personal Mileage @MI Rat	Other P-Card or Foreign Wire
Parking/Toll	TOTAL ESTIMATED COSTS

INDEX	ACCT	AMOUNT	BUDGET AUTH APPROVAL

Travelers Signature:	Date:	
Supervisor/Approving Auth:	Date:	
Budget Auth (if different than Supervisor):	Date:	
Chair/Dean/VP:	Date:	
President:	Date:	
Travel Office:	Date:	Encumbered: