

Pre-approval Required  
Faculty Travel Request Form

Traveler \_\_\_\_\_ Date \_\_\_\_\_  
Name as it appears on your I.D.

Travel Information

Domestic Travel

International Travel

Vendor \_\_\_\_\_ **or** attach a printed copy of the  
travel request from the vendor.

Departure Date and Time \_\_\_\_\_

Return Date and Time \_\_\_\_\_

Destination \_\_\_\_\_

Detailed Business Purpose \_\_\_\_\_

\_\_\_\_\_

If any of the travel is personal, we must obtain a cost comparison showing that the price of your flight is equal to or less than the cost of the flight if you had only been at the destination during days of business. Please provide 3 lowest quotes for business travel dates from a site such as Expedia or Travelocity to document the cost of business travel.

If applicable, provide the dates of personal travel \_\_\_\_\_

Foreign Travel Policy: Travel to be charged to a Contract and Grant Account must be booked with a US Carrier. If applicable, the itinerary must note a "Code-sharing Agreement" with a US carrier for all connected flights. This must be clearly stated on the trip itinerary (ticket).

\_\_\_\_\_

For P-card purchases by the main office, provide the following information.

Date of Birth \_\_\_\_\_ Frequent Flyer No. \_\_\_\_\_

Seating Preference Aisle or Window

Emergency Contact: Name \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_

Signature Authorization \_\_\_\_\_ Index \_\_\_\_\_