



Request for Travel Authorization

You need to fill out this form if 1) you are traveling during the school year during the week (authorization for travel leave); 2) you are requesting travel expense reimbursement.

1

NAME _____ UT EID _____

TITLE _____ DATE _____

Authorized Absence

DEPARTURE DATE + TIME _____

RETURN DATE + TIME _____

DESTINATION(S) _____

Reason for Travel (e.g. your University related activity or transactions)

Name of faculty of equal rank or higher who will oversee your class and be available for student consultations while you are absent:

2

Do you request reimbursement? Yes [] No []

Are you receiving support from another source (SRG, Faculty Travel Grant, etc.)? Yes [] No []

If yes, please indicate source and amount:

Are you receiving an honorarium or any other support for this travel? Yes [] No []

If yes, please indicate source and amount:

Reimbursement should be sent:

[] DIRECT DEPOSIT [] CAMPUS BOX [] ADDRESS: _____

ESTIMATED COSTS

Transportation _____

Lodging _____

Per diem (\$41/day) _____

Other _____

Total request _____

Description: _____

ACCOUNT _____ AMOUNT: _____

JACK RISLEY, CHAIR

Office Use Only

Table with 2 columns: Faculty Travel balance, Chair or Professorship Acct. #, Other Acct. Title + Number; Faculty Development balance, Chair or Professorship balance, Account Balance.