Authorization for Travel

**(All faculty are required to submit for International Travel)**

## Name: Click or tap here to enter text. Email and phone: Click or tap here to enter text.

***Dates of business travel****:* Click or tap here to enter text.***Dates of personal travel****:* Click or tap here to enter text.

***Destination****:* Click or tap here to enter text.

[ ] I have reviewed [Campus Travel Guidelines](https://coronavirus.mst.edu/files/2020/08/COVID-Travel-Guidance.pdf).

[ ] **International Travel**: I have contacted International Affairs to ensure that I am informed of available resources, aware of potential risks, and in compliance with all rules and regulations. I have also attached the current [Travel Advisory](https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html/), which is at **Level\_\_**\_\_.

## Purpose of travel: Please explain your reason for traveling. You may attach more documentation, if needed. Click or tap here to enter text.

***How will your class be covered?*** Click or tap here to enter text.

***Source of Funds:***

|  |  |
| --- | --- |
| Fund name: Click or tap here to enter text. Mocode: Click or tap here to enter text.Estimated amount: Click or tap here to enter text. | Dept ID: Click or tap here to enter text. Project: Click or tap here to enter text. |

## Estimated Expenses:

Transportation Costs (including rental car, airfare, train, mileage, etc.: Click or tap here to enter text.
Registration Fee: Click or tap here to enter text. Hotel: Click or tap here to enter text.

Meal Reimbursement: Click or tap here to enter text. Misc. Travel Expense: Click or tap here to enter text.

**Total Requested:** Click or tap here to enter text.

### [ ]  This trip is solely for the legitimate business purpose clearly outlined above.

[ ]  This trip will combine legitimate business and personal travel as noted above.

####  DATE:

TRAVELER

####  DATE:

DEPARTMENT CHAIR/SUPERVISOR

####  DATE:

VICE PROVOST AND DEAN

*[Signature only required for department chair travel and all international travel]*

####  DATE:

VICE CHANCELLOR FOR RESEARCH

*[Signature only required for research center directors]*

####  DATE:

FISCAL MANAGER

####  DATE:

PROVOST AND EXECUTIVE VICE CHANCELLOR
FOR ACADEMIC AFFAIRS

*[Signature only required for Dean’s travel]*