

Request for Travel

KENNESAW STATE UNIVERSITY REQUEST FOR AUTHORITY TO TRAVEL AT UNIVERSITY EXPENSE

Name:			
_____	MI	_____	
First		Last	
ID Number:			
_____	OR	_____	
PeopleSoft Vendor ID #		Employee ID #	
Department:			
Address:			
_____	_____	_____	_____
Street	City	State	Zip

Itinerary:	
General Purpose of the Travel:	
Dates of Travel:	Mode of Transportation:
FROM: _____ TO: _____	_____

Estimates of the Cost of Travel:					
Registration <small>(Use P-card when possible)</small>	Hotel	Meal	Transportation	Other	Total
Budget to be Charged:					
Speed Chart Number/Agency Account	And	Account	Project		

Approved by:	
_____	_____
Department Head (Print Name)	Signature and Date

Approval to be absent from campus: <small>(Complete ONLY if paid by different department OR no reimbursement is to be requested)</small>	
_____	_____
Department Head (Print Name)	Signature and Date

Requested by:	
_____	_____
(EMPLOYEE REQUESTING TRAVEL AUTHORIZATION)	Signature and Date

INSTRUCTIONS:

THIS FORM IS TO BE COMPLETED WELL IN ADVANCE OF ANY TRAVEL OUTSIDE THE STATE OF GEORGIA. THE COMPLETED FORM MUST BE SIGNED BY THE PROPER OFFICIAL TO APPROVE ABSENCE FROM CAMPUS AND/OR AUTHORITY TO REIMBURSE TRAVEL EXPENSES. THE EMPLOYEE SHOULD RETAIN A COPY OF THE SIGNED FORM. THE ORIGINAL MUST BE SUBMITTED TO THE OFFICE OF BUSINESS SERVICES DIRECTLY OR TO A BUSINESS MANAGER IF APPLICABLE.

PLEASE NOTE:

THIS AUTHORIZATION FROM DOES NOT IMPLY AUTOMATIC APPROVAL OF INDIVIDUAL ITEMS OF EXPENSE, BUT SERVES THE PURPOSE OF APPROVING THE TRIP AND DETERMINING THE SUFFICIENCY OF FUNDS WITHIN THE DEPARTMENT'S BUDGET. ACTUAL REIMBURSEMENT WILL BE MADE ON THE BASIS OF LEGITIMACY OF INDIVIDUAL ITEMS LISTED ON THE TRAVEL EXPENSE STATEMENT. FOR QUESTIONS CONCERNING CURRENT TRAVEL POLICIES, PLEASE REFER TO THE UNIVERSITY TRAVEL REGULATIONS OR CALL THE OFFICE OF BUSINESS SERVICES.